

August 19, 2016

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: **26078-Revised manuscript.docx**).

Title: Update on the endoscopic treatments for achalasia

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Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 26078

The manuscript has been improved according to the suggestions of reviewers:

1 Revision has been made according to the reviewer's suggestions (whenever possible).

(1) Comments from reviewer 02510223:

This is a carefully done study. The paper structure is perfect, the content is plentiful and the references are latest. The results are of considerable clinical significance, which can guide clinical work-- POEM as a minimally-invasive and the most effective treatment is regarded as the first-line therapy over others at present. Nonetheless, individualized treatment regimen is also considerable. Its ending shows a few endoscopic operation pictures with literal statement, which makes readers clear. In general, this manuscript is very good. However, it still has some imperfection, I think that the paper's content can't accord with the subject. This article title is Endoscopic treatments for achalasia, but the author uses a plentiful of words to describe traditional therapies about achalasia. The emphasis is not prominent. On the whole, this is a good article which deserves publication after modifying.

Authors' response: We appreciate this reviewer's comment and assessment of our paper. The focus of this manuscript was on endoscopic therapies for achalasia, with emphasis on per oral endoscopic myotomy (POEM). We did describe in some detail pneumatic dilation, which can be done with endoscopic guidance, as well as endoscopic injection of botulinum toxin. While more than one-third of our text focuses on POEM and other endoscopic treatment modalities, we thought it best to discuss endoscopic therapies in the broader context of caring for patients with achalasia, which includes discussing how the disease presents and is diagnosed. Furthermore, we only thought it proper to compare endoscopic therapies with

other treatments (such as Heller myotomy), which also play an important role in treating patients with this incurable disease.

In order to address the reviewer's concern, we have emphasized the role of endoscopy in the diagnosis and management of achalasia by adding additional passages and details in the Abstract, Introduction, Diagnosis section, Botulinum toxin injection section, Per oral endoscopic myotomy section, and in the Conclusion. We have also added one additional reference that highlights the efficacy of POEM in treating patients with type III achalasia. By making these changes, we hope that we have further underscored the importance of endoscopy in the evaluation and treatment of this disease.

2 References were update, and minor edits to the text were made.

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

Dushant S. Uppal, MD, MSc
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