

November 9, 2016

Editor-in-chief

*World Journal of Gastrointestinal Surgery*

**ESPS MANUSCRIPT NO: 29663**

**Laparoscopic Retrosternal Gastric Pull-up for Fistulized mediastinal Mass**

Dear Editor-in-Chief,

Thank you very for the opportunity to revise our manuscript and for your interest in publishing this work in *World Journal of Gastrointestinal Surgery*. We have modified the manuscript according to the journal instructions and the reviewers' suggestions. We have responded directly to all points raised by the peer-reviewers (reviewers' comments in *italic*, followed by our response in **bold**).

Please find attached copy of the revised manuscript.

Sincerely,

Daniela Molena, MD

*Reviewer #1:*

*The authors describe an interesting approach for esophageal replacement or by/pass when the retromediastinal route is unsuitable. While they should be congratulated for the procedure, in the discussion it could be debated the choice of the stomach instead of the colon, considering that not infrequently length required for the bypass to the neck through a retrosternal route may be difficult to achieve with the stomach. On the other hand, using the colon, most failures after coloplasty are due to coloplasty dysfunction. Therefore, a more detailed specification of advantages and disadvantages of colon and stomach as conduits for this route would enrich the paper. Analogously, at least a mention of the subcutaneous presternal route (obviously more suitable for the colon) could be made. Moreover, the use of botulin toxin to induce a pyloric paralysis may have a transient effect and comparison and short discussion between this simple, especially for laparoscopy, method, and the traditional pyloroplasty would be beneficial.*

**Thank you for your feedback. We have edited the discussion of this case report according with your suggestion and hopefully this has improved the manuscript and clarified to the audience our surgical choices.**

*Reviewer #2:*

*Its a well described case of a laparoscopic retrosternal gastric bypass. It does not seem to add much to the literature, as a series of patients who underwent the same procedure has already been published since 2013.*

**Thank you very much for your positive comment.**