

Answering reviewer

1. First, the patient's diagnosis of foreign body in the large intestine is clear, and there are no signs of peritonitis or perforation. So has the author used a colonoscope alone to try to remove this foreign body, or what are the difficulties in using a colonoscope alone?

Knowing that the FB was a shampoo bottle, and it is quite large, hence endoscopic retrieval alone may not be adequate since we know that endoscopic equipment to retrieve specimen is small for example the Roth Net retrieval device.

2. Based on the patient's medical history and imaging tests, it is usually not difficult to diagnose foreign bodies in the large intestine. So what are the advantages of laparoscopy in the treatment of foreign bodies in the large intestine?

Hence, the patient was therefore subjected to laparoscopic assessment as well. Many advantages of laparoscopy surgery in the treatment of FB removal. It allows assessment of intraperitoneum, in this case we can assess large bowel condition with just a keyhole wound.

3. Which patients need or are suitable for the above-mentioned dual endoscope combination?

In our case, combination approach was suitable because firstly, this is because the FB was trapped higher up, at the descending colon area. Secondly, we speculated the affected bowel was probably inflamed, thickened, and oedematous. Thirdly, there was a possibility of a stricture or stenotic bowel lumen distally either due to angulation or repetitive injuries.

4. When there is no indication for emergency laparotomy, what medical treatments may help to expel foreign bodies?

Generally, using laxative as medical treatment to help expel FB is not recommended.