

**Dear Editor,**

Please find enclosed the revised manuscript ESPS manuscript n°10248 “Chronic pancreatitis: Surgical disease. Role of Frey procedure” for possible publication in ***World Journal of Gastrointestinal Surgery***.

The following points were reviewed;

**Reviewer 39529:**

We would like to thank the reviewer for the careful evaluation of our manuscript.

We totally agree with the reviewer concerning the risk of bleeding during the procedure in case of portal hypertension with pancreatic venous collaterals. Indeed there is no evidence of high level for that Frey technique significantly reduces the risk of bleeding, so the authors delete the sentence on page 8.

There are few data on the Frey procedure in cases of non-dilated main pancreatic duct or this data is not specified in the reported studies.

The authors report the technique of V-shaped excision with partial pancreatic head resection as described by Izbicki as an alternative approach. The authors added 2 reference (58-59) according to this technical point.

**« In these cases, an alternative could be an extended drainage by “V-shaped excision” advocated by Izbicki and al.<sup>58,59</sup> with a partial head resection. This technique seem to be a secure and effective approach for small duct chronic pancreatitis achieving significant improvement in quality of life and pain relief. » page 12**

**Reviewer 503542:**

The reference 44 was cited in the text page 10: “The Frey procedure can be performed with low mortality (<2%). The published complication rates range from 7 to 42%<sup>44-49</sup> »

The reference 40 was corrected: « Amudhan A, Balanchadar TG, Kannan DG et al. Factors affecting outcome after Frey procedure for chronic pancreatitis. **HPB (Oxford)** 2008;10:477-82 »

**Editor comments:**

A running title was proposed: « frey procedure » (page 1).

The City and postcode were inserted (page 1).

Keywords and Core Tip chapter were added. (page 2)

The references were cited in square brackets, with doi and PMID number if available.

I look forward to hearing from you.

Best regards,

Pr Patrick Pessaux, MD, PhD