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Respected Editor

The World Journal of Gastrointestinal Endoscopy

Re: Reply to the comments by the reviewers

We are really grateful to you for your effort and time while reviewing our manuscript titled "An evidence based review of the impact of image enhanced endoscopy in the diagnosis of gastric disorders". We have modified our manuscript based on the comments provided by the reviewer. The following are the responses:

Major Comments

1. *This review would benefit greatly from colour images. It is difficult to visualise the different techniques without images.*
 - We agree with the reviewer. We are submitting images along with the revised manuscript.
2. *A table to compare the different techniques and their indications and strength of evidence would be very helpful*
 - We are providing three tables along with the revised manuscript.

3. *Introduction: there is a very long first paragraph about early gastric cancer which is probably too long. The authors should focus on the techniques for detecting early cancer instead.*
 - As suggested by the reviewer, we have revised the 'introduction' segment.
4. *Many acronyms are used which makes the manuscript difficult to read for those unfamiliar with these acronyms. The authors should consider limiting the acronyms or attach a glossary of the acronyms*
 - We agree that this review contains too many abbreviations which may be distracting to the readers. A glossary of the acronyms is being submitted along with the manuscript.
5. *Introduction, last paragraph, second last sentence: the authors state that IEE techniques are found to be efficacious in gastric pathologies but are rightly more cautious in their conclusion. The sentence should therefore be rephrased without sounding that the authors have come to a conclusion before reviewing the literature.*
 - We agree with the reviewer. The sentence has been revised.
6. *Chromo endoscopy section: some of the dyes are described with magnification (acetic acid) while the others are not. The authors should be consistent and perhaps just state "acetic acid in stomach".*
 - The subheadings and descriptions are revised now.

Minor Comments

1. *Abstract: "extremely good prognosis". This sound like hyperbole and the authors should consider deleting "extremely".*
 - The sentence has been revised
2. *Paragraph on White Light Endoscopy with Magnification: part of this section seems to be a repetition of paragraph 2 under White Light Endoscopy.*

- The paragraph has been revised
3. *Characterization of EGC with only ME, last paragraph, and last sentence: what are the majority of later studies utilizing ME combined with IEE techniques? The authors should clarify this.*
 - The line has been deleted now.
 4. *Acetic acid section: they mention the use of acetic acid in Barrett's. This is confusing as the review is of gastric disorders not oesophageal.*
 - The sentences have been revised
 5. *Acetic acid section: the paragraph describing the five categories is probably best placed elsewhere as this may be a generic finding rather than just related to acetic acid. -- > not changed since the categories were specially described with EME.*
 - We have not made any changes here since these categories were specifically described with the EME technique.
 6. *Acetic acid plus indigo carmine: are these mixed together or sprayed separately?*
 - A sequential spraying was done in the referenced study. The sentence has been revised for further clarity.
 7. *Narrow band imaging section, last paragraph: this sounds like a sales pitch/conclusion for the technique. Perhaps it is an aim that needs to be confirmed by evidence.*
 - The sentence has been revised
 8. *NBI screening of gastric pathologies: the first sentence is repetitive from an earlier section.*
 - The sentence has been revised
 9. *Magnifying NBI for H pylori gastritis: The first two sentences are probably unnecessary as they add little to the flow of the review.*
 - The sentence has been revised

10. *M-NBI for diagnosis of horizontal extent of EGC, first paragraph: they state that a multibending endoscope in combination with M-NBI was associated with a higher feasibility of resections. Was it due to the multibending scope rather than M-NBI? -- > it was unclear and cautionary sentence has been added.*

- This differentiation in terms of benefit is not entirely clear from the study. The authors of the study had also mentioned this doubt in their study. Now, the sentences have been revised in our manuscript for further clarity.

We again thank you for your valuable time and effort for reviewing our manuscript. We look forward to answer any other query.

Thanking you sincerely

Dr Ikram Hussain

Dr Ang Tiing Leong