

## **Answering reviewers**

### **COMMENTS TO AUTHORS**

Interesting article

Response: Thank you very much for your nice comment.

**Reviewer's code:** 02705964

### **COMMENTS TO AUTHORS**

The manuscript entitled 'Endoscopic ultrasound-guided gallbladder drainage for acute cholecystitis: long-term outcomes after removal of a self-expandable metal stent' is more useful research. EUS-GBD with an SEMS is a possible alternative treatment for acute cholecystitis. Long-term outcomes after removal of the SEMS were excellent. Recurrence was seen in one patient. EUS sonographic images should be added.

Response: Thank you very much for your nice comment. We added EUS sonographic images in patient with recurrence in the revised manuscript.

**Reviewer's code:** 01559599

### **COMMENTS TO AUTHORS**

#1: Indication for EUS-GBD is uncertain. Is there any reason to select EUS-GBD for patient with cholecystitis? Metal stent is too expensive to be used temporarily for cholecystitis. Compared to EUS-GBD, PTGBD is equally effective for cholecystitis and its cost is lower than EUS-GBD using metal stent.

Response: Thank you very much for your nice suggestion. 12 patients who underwent EUS-GBD were deemed unsuitable for cholecystectomy because the surgical performance indications were poor. Moreover, they were elderly person and had a risk of self-removal of drainage tube. We added the information to clarify why EUS-GBD was selected for them in the patients and methods section in the revised manuscript.

#2: It is very interesting that gallstones disappeared after EUS-GBD. Gallstones are thought to move through the fistula between gallbladder and duodenum/stomach. However, diameter of gallstones

must be less than those of metal stent. Authors should describe details.

Response: As you pointed out, diameter of gallstones must be less than that of metal stent. In fact, all gallstones in study cases were less than 10mm. We added this information in the result section in the revised manuscript.

#3: Severity of acute cholecystitis is not shown. Most patients with mild cholecystitis are resolved by conservative treatment without gallbladder drainage.

Thank you very much for your nice pointed out. All cases were moderate cholecystitis; therefore, conservative treatment with gallbladder drainage was selected for all patients as first treatment. We added this information in the result section in the revised manuscript.

#4: One patient recurred cholecystitis even after gallstones disappeared. Why cholecystitis recurred?

Response: In this case, contents in the gallbladder at the first examination as well as at the time of recurrence were mainly sludge without apparent gallstones. There is a possibility that this patient recurred cholecystitis with uncertain small gallstones or sludge remaining after EUS-GBD. We added EUS sonographic images in patient with recurrence in the revised manuscript.