

## Format for ANSWERING REVIEWERS



August 25, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 4185-review.doc).

**Title:** Ultrasonography in diagnosing chronic pancreatitis - New Aspects

**Author:** Georg Dimcevski, Friedemann G Erchinger, Roald Havre, Odd Helge Gilja

**Name of Journal:** *World Journal of Gastroenterology*

**ESPS Manuscript NO:** 4185

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer.

We appreciate the comments from the reviewers for the above manuscript. We have now addressed the comments from the reviewers in the point-by-point reply, changes are marked with bold.

**Reviewer #1:** This manuscript focused on the advanced sonographic images to pancreatic diseases is abundant and well-written. As the authors' statements, ultrasonography is a noninvasive, inexpensive, no complications, and easily perform technique. The utility of ultrasonography can not only make the current diagnosis early, but also reduce the use of CT, MRI, endoscopy or other studies. The authors introduce ultrasonography principles and evaluations in the first portion of manuscript, and describe several pancreatic diseases, including acute pancreatitis, chronic pancreatitis, autoimmune pancreatitis, pseudocyst and pancreatic solid neoplasm, in the following text. The contents of this manuscript is intact and order line, and has a high value to be published.

However, there are two points need to be clarified: 1. Since the authors mention differential sonographic patterns about several pancreatic diseases, the original title " Ultrasonprahy in diagnosing chronic pancreatitis-New Aspect", might be adjusted to " Ultrasonography in diagnosing pancreatic diseases-New Aspect". 2. The authors describe several pancreatic diseases such acute pancreatitis, chronic pancreatitis, autoimmune pancreatitis, pseudocyst and pancreatic solid neoplasm, but how about the pancreatic neuroendocrine tumor ? Could the authors make a supplement about this disease ?

Our reply: We agree that that the title could be adjusted. On the other hand we focus on chronic pancreatitis, complications and differential diagnosis. The proposed title change would require substantial more space. Regarding a supplement of pancreatic neuroendocrine tumors we have the same spatial constraints.

**Reviewer #2:** The manuscript contains an overview of modern ultrasound techniques applied to some pancreatic diseases, with particular attention to chronic pancreatitis. In the work, there is not a research and, therefore, no materials, methods and results, but a methodical examination of ultrasound exam, based on results coming from the literature. The presentation of topics and readability of the manuscript is good. Specific comments In the abstract, it should be clearly stated that the subject was held for professional development, and there is not a new own research from which it can draw results. From a pedagogic and a professional updating point of view, the sections "Introduction" and "The

ultrasound examination" have a good integration in the text. In "Modalities in ultrasonography" are evidenced specific technical details that are most important for sonographers than for the clinicians. In the section "Methods in ultrasonography" and "EUS in the workup of CP" there is an analysis of sonographic findings through new methods related specifically to chronic pancreatitis. The contents of these sections is interesting, and they come from data published in the international literature. In the section "Inflammatory disease of the pancreas", chronic pancreatitis and autoimmune pancreatitis are well developed. In the section on pseudocysts there is an inaccuracy: post-necrotic pseudocysts are not common, and is very lacking about the study of cystic lesions of the pancreas. In my opinion, it needs to eliminate the imbalance between the presentations of the sonographic features of various diseases. This could be achieved by increasing the lacking parts of the work as the section on cystic lesions and solid tumors; risk, however, to extend the manuscript too. More simply, it could eliminate those parties (cystic lesions, etc...) and focus the attention on chronic pancreatitis, as indicate on the title. Bibliography has a good Reference List. The images are well integrated.

Our reply: Regarding the section on pseudocysts we have now modified the text accordingly: **Pseudocysts can arise as a complication of acute pancreatitis and also often occur in CP.**

We also agree that the manuscript could benefit, if the two sections were increased. But as the reviewer state this will extend the manuscript. These sections about pseudocysts, true cysts and other pancreatic solid neoplasm are indeed incomplete but in our opinion they still play a role in diagnosing and monitoring chronic pancreatitis.

3 References and typesetting were corrected

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.



Georg Dimcevski M.D., Ph.D., Associate professor  
Section Head of Gastroenterology, Department of Medicine  
Haukeland University Hospital  
Jonas Liesvei 65, 5021 Bergen, Norway  
Work telephone: [+47-55972969](tel:+47-55972969)  
Mobile telephone: [+47-41523556](tel:+47-41523556)  
E-mail: [Georg.dimcevski@helse-bergen.no](mailto:Georg.dimcevski@helse-bergen.no)