

28 February, 2019

Andrej S Tarnawski

Editor-in-Chief

World Journal of Gastroenterology

Re: Esophageal diverticulum: New perspectives in the era of minimally invasive endoscopic treatment (Manuscript No: 45869)

Dear Editor:

Thank you for providing us with the opportunity to revise our manuscript titled '**Esophageal diverticulum: New perspectives in the era of minimally invasive endoscopic treatment**' (Manuscript No: 45869).

We wish to express our appreciation to the reviewers for their assessment of our study and their insightful comments and suggestions, which we feel have helped us to improve the quality and merit of our work. We have provided a point-by-point response to each comment below. For your convenience, the changes in the revised manuscript are highlighted.

The editor mentions the requirement of figures in PPT files that are fully editable. We checked the PPT file and I can confirm that all the arrows, text boxes, and the figures themselves are fully editable and movable.

We believe that our work makes a significant contribution to the literature because of the current absence of these topics in your journal. We are looking forward to sharing our insights with the readership of your journal.

We hope that our manuscript is now suitable for publication and look forward to hearing from you.

Sincerely,

Hiroki Sato, MD, PhD

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Comments to Author:

Reviewer #1: This review is focused on the new perspectives in the treatment of esophageal diverticula, in the present era characterized by minimally invasive strategies. The Authors have described the treatment options of main esophageal diverticula. The review is well written and structured and the language is good. However I only have some comments: · I wonder if the Author have really described all the possible treatments for epiphrenic and Zenker diverticulum. The Authors focused the attention only on s-POEM, an approach the they have developed, and a few mention is made on other surgical approaches. · I suggest to describe, for all the technique described, also the side effects and eventual complications (type, frequency). · In the conclusions it is worthy to be mentioned that long term follow-up studies following endoscopic procedures are lacking, also in terms of esophageal motility - performed with the same HR-manometry –

Thank you for your comment. An additional discussion of the outcomes of surgical management has been added to the revised manuscript (page 6, line 20–page 7, line 4). We have also added an additional comment to the revised Conclusion section (page 13, lines 8-10).

Reviewer #2:

Thank you for your review. The entire manuscript has been reviewed once again by a professional English editing service in order to further polish its language.