

To: Editor of "World Journal of Gastrointestinal Surgery"

Date: 21-March-2019

Dear Editor and Reviewers,

First of all, we would like to thank you very much for giving us the opportunity to revise our manuscript for publication in your distinguished journal. We would also like to thank you for your valuable comments and suggestions in order to improve our manuscript. The manuscript has been revised according to your comments.

We hope that the present revision will satisfy the high standards of your journal. If you have any questions regarding the revision, please do not hesitate to contact me. We are looking forward to hearing from you.

We are also sorry for being late.

Kind regards,

Antonios N. Athanasiou, MD, MSc, PhD

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Reviewer's 1 comments

1. We revised the entire manuscript according to your suggestions so as to make clear to the readers what kind of reconstruction the patients underwent in every study that was cited in the manuscript (neck reconstruction or neck anastomosis VS chest reconstruction or chest anastomosis or thoracic oesophagectomy). We agree with your comment because we believe that is very important for the readers to know what is the rate of complications, benefits, alternatives of the two main sites of oesophageal reconstruction (cervical or thoracic).
2. We performed grammar revisions in the first paragraph of the item Epidemiology and in the first paragraph of Clinical manifestations.

Reviewer's 2 comments

Dear reviewer, thank you very much for your valuable comments.

1. As far as the first comment is concerned, the manuscript has been written by two native speakers of English (Mr Ewen A Griffiths and Mrs Mairead Hennessy). However, the manuscript has been revised and corrected by Miss Ioanna Georgiou. She has relevant subject expertise, excellent communication skills and experience in language polishing, helped us to iron out few problematic kinks in our writing.

We guarantee the enhancement of our manuscript by

- Fixing grammatical errors
- Ensuring that it meets accepted standards of scientific English
- Improving sentence clarity and the flow of ideas
- Resolving ambiguities caused by either syntactic or semantic factors
- Removing redundancies

Last but not least, we revised the manuscript in order the language to be American English in all sections.

2. The full name rather than abbreviations in title and abstract when the terminologies appeared at the first time was corrected.

Section/topic	#	Checklist item	Reported on page #
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3. You agree with your third comment. You revised the abstract so as to include summary information.

4. As far as the fourth comment is concerned, we have added to the manuscript the main complications of the esophageal replacement including delayed gastric emptying, anastomotic leak, bleeding, chyle leak etc.

5. In the paragraph **Risk Factors**, the correct phrase is “thoracic epidural analgesia”. We corrected the paragraph accordingly.

Reviewer’s 3 comments

1. As far as the first is concerned, you attached the PRISMA CHECKLIST below.

2. We strongly agree with your second comment. As a result we added a sentence to the method so as the objectives of this study to be clear (Our review details the pathophysiology, predisposing factors, clinical symptoms, diagnostic approach to this problem and we will highlight treatment options for the management of this life threatening condition.) Furthermore, we added a "RESULTS" paragraph in the manuscript. Moreover, we reordered as per instructions and highlighted the main section headings. The original reason for this review was to perform a contemporaneous systematic review so as to describe and discuss the incidence of this rare complication, clinical manifestations, diagnostic strategy and management options available to help esophageal surgeons deal with this situation.

TITLE			
Title	1	Identify the report as a systematic review, meta-analysis, or both.	1
ABSTRACT			
Structured summary	2	Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number.	3
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of what is already known.	4
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	4
METHODS			
Protocol and registration	5	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, provide registration information including registration number.	8
Eligibility criteria	6	Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.	8
Information sources	7	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.	8
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	8
Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).	8,42
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	8
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	9
Risk of bias in individual studies	12	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.	9
Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in means).	39

Synthesis of results	14	Describe the methods of handling data and combining results of studies, if done, including measures of consistency (e.g., I^2) for each meta-analysis.	Not applicable
Section/topic	#	Checklist item	Reported on page #
Risk of bias across studies	15	Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies).	11,13,39
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.	Not applicable
RESULTS			
Study selection	17	Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally with a flow diagram.	31
Study characteristics	18	For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow-up period) and provide the citations.	39
Risk of bias within studies	19	Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).	Not available
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot.	39
Synthesis of results	21	Present results of each meta-analysis done, including confidence intervals and measures of consistency.	Not applicable
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies (see Item 15).	11,13,39
Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).	no
DISCUSSION			
Summary of evidence	24	Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers).	17,18
Limitations	25	Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias).	17,18
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	17,18
FUNDING			

Funding	27	Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review.	no
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In order to facilitate editing, all changes have been highlighted in yellow colour in the annotated manuscript. We hope that this revision will satisfy the high standards of your distinguished journal.

With the submission of this manuscript I declare that the above mentioned manuscript has not been published elsewhere, neither is accepted for publication or under editorial review for publication elsewhere. Furthermore, I state that all authors are aware and approve of its submission.

Best regards,

Antonios N. Athanasiou, MD, MSc, PhD

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To: Editor of "World Journal of Gastrointestinal Surgery"

Date: 22-March-2019

Dear Editor and Reviewers,

We would like to thank you very much for your new revision. The manuscript has been revised according to your comments.

We hope that the present revision will satisfy the high standards of your journal. If you have any questions regarding the revision, please do not hesitate to contact me. We are looking forward to hearing from you.

1. We have corrected all the references. Five out of 81 references have been cited twice in the manuscript. After our corrections, the overall number of the references is 76.
2. As far as the second comment is concerned, we have revised the manuscript so as to eliminate the similar sentences.

Best regards,

Antonios N. Athanasiou, MD, MSc, PhD

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