October 10, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 5024-review.doc).

Title: Bowel preparations as a quality indicator for colonoscopy

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Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 5024

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

1. We have added a running title in the title page as follow.

   → "**Bowel preparation for colonoscopy**"

2. We have written a "Core tip" of less than 100 words as follow.

   → "**Bowel preparation is one of the most common patient objections to participation in screening colonoscopy, and inadequate preparation is a major obstacle to achieving a high-quality colonoscopy. Furthermore, the two most important quality indicators of colonoscopy, adenoma detection rate and cecal intubation rates are associated with the quality of bowel preparation. Therefore, bowel preparation is an essential part of high-quality colonoscopy because only optimal colonic cleansing allows the colonoscopist to obtain a good view of the entire colonic mucosa. More awareness of the importance of adequate preparation leads to improve the quality of colonoscopy.**"

3. Format has been updated (heading);

   → From "Bowel preparation and diagnostic yield" to "**BOWEL PREPARATION AND DIAGNOSTIC YIELD**"

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

   → As you recommended, we have added 1 figure and 2 tables to be improved in its comprehension and its presentation as follows.
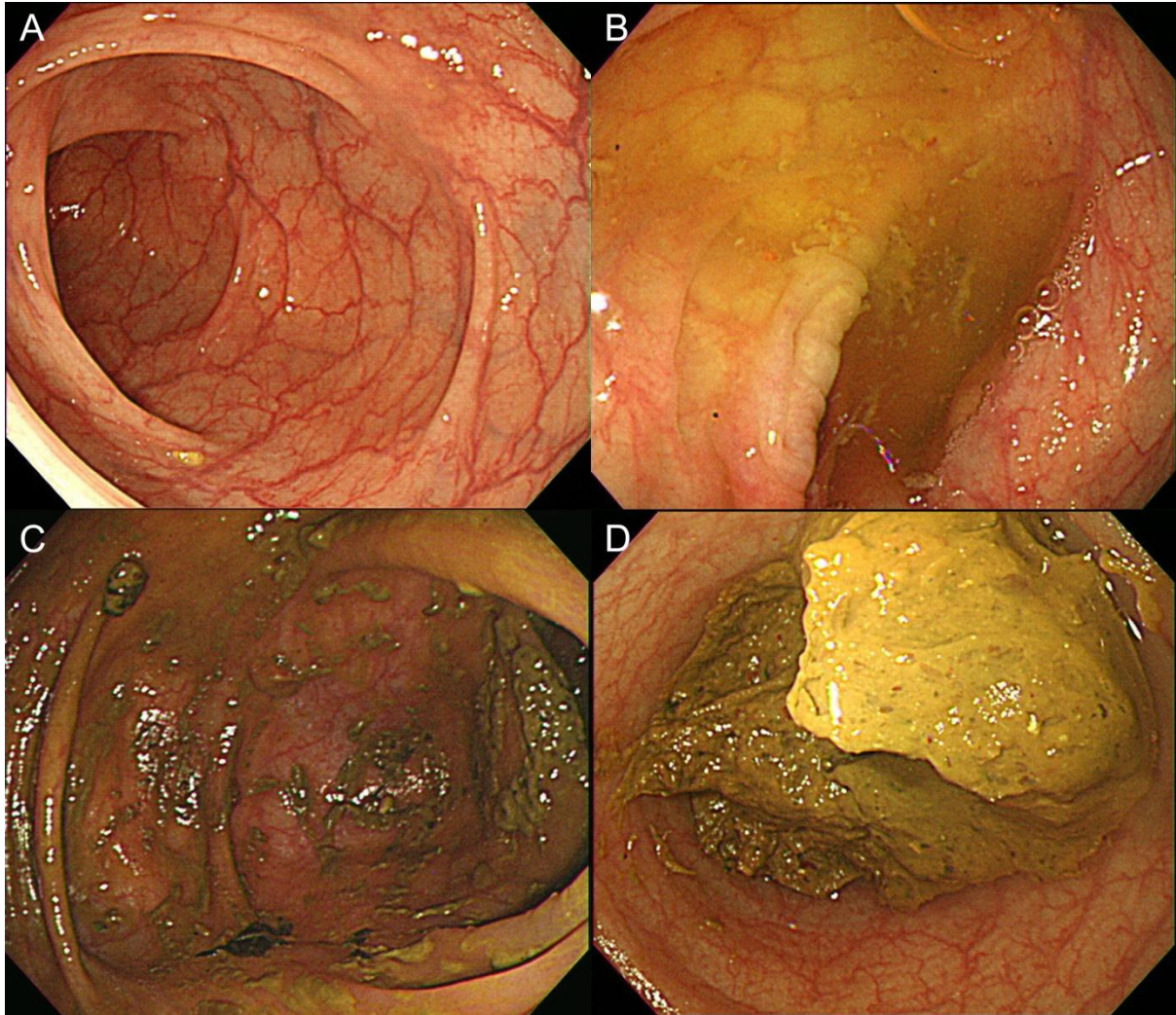
Figure 1 Representative endoscopic image according to the bowel preparation scale. A: Excellent, there are no or minimal solid stool and only small amount of clear fluid that require suctioning; B: Good, it is used to describe no or minimal solid stool with large amounts of clear fluid that require suctioning; C: Fair, it means the presence of semisolid debris that are cleared with difficulty; D: Poor, it is impossible to observe the colonic mucosa because of solid or semisolid stools.

Table 1. Quality indicators that can be impacted by bowel preparation in colonoscopy

Indicator	Definition	Acceptable level
Bowel preparation	Proportion of procedures in which colon cleansing is considered excellent or good	> 90%
Adenoma detection rate	Proportion of colonoscopies performed in asymptomatic individuals over 50 in which at least one adenoma has been detected.	> 20% (men >25% & women >15%)
Withdrawal time	Mean time from cecal intubation to colonoscopy extraction through the anus.	> 6 minutes
Cecal intubation rate	Proportion of procedures in which cecal intubation is achieved.	> 95%

Table 2. Summary of studies demonstrates an association between bowel preparation and procedural success

Study	Number of subjects	Perspective	Outcomes	Results
Bowles et al.[17]	9223	Prospective	Cecal intubation rate	Poor bowel preparation (19.6%)
Bernstein et al.[18]	693	Prospective	Predictor of cecal intubation time (≥20 min)	Poor bowel preparation ($P = 0.0077$)
Kim et al.[19]	909	Prospective	Prolonged insertion time (>10 min)	Inadequate bowel cleaning (OR 2.8, CI 1.41-5.56, $P = 0.003$)
Nelson et al.[20]	3196	Prospective	Predictor of incomplete colonoscopy	Poor bowel preparation (failure rate = 19.3%, $P = 0.001$)
Aslinia et al.[21]	5477	Retrospective	Cecal intubation rate	Inadequate bowel preparation (OR 0.17, CI 0.14-0.21, $P < 0.001$)

OR: Odd ratio; CI: Confidence interval.

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

Sincerely yours,

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