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*World Journal of Gastroenterology*

**Screening colonoscopy: the present and the future**

**Type:** Editorial

Chelsea V Hayman, Dinesh Vyas

Dear Lian-Sheng Ma,

Subject: Submission of revised paper Manuscript NO.: 59916

Thank you for your email dated 27 October 2020 enclosing the reviewers' comments. We have carefully reviewed the comments and have revised the manuscript accordingly. Our responses are given in a point-by-point manner below. Changes to the manuscript are shown below.

We hope the revised version is now suitable for publication and look forward to hearing from you in due course.

Sincerely,

Chelsea V Hayman, Dinesh Vyas

California Northstate University College of Medicine

Point by point response to reviewers comments

Response to Reviewer 1.

Thank you very much for the kind words of appreciation of our paper. Concerning the comments:

1. Core-tip - changing "gastric" mucosa to "colonic" mucosa was done.
  - a. **Core tip:** Training residents in water-insufflation colonoscopy techniques are simpler and easier to teach and lead to reduction in patient pain, need for sedation, and increased visibility of the colonic mucosa.
2. Citing the first RCT trial and methodology along with the improved method pioneered by Japanese endoscopists was done.

- a. It was Japanese endoscopists who evolved this technique by using syringes for water infusion and complete air suction to 'collapse' the colonic lumen and continuously infusing water to advance the colonoscope<sup>[8]</sup>. This method straightens the colon and allows for better navigation of the scope through less extreme angles. As no air is left behind, this technique reduces post procedure pain and allows for faster recovery. The first randomized control trial in 2010 showed that using the water immersion technique compared to standard air insufflation increases the success rate of minimal sedation colonoscopy<sup>[9]</sup>.

Response to Science Editor.

Thank you very much for the kind words of appreciation of our paper. Concerning the comments:

1. Author contribution section was added
  - a. **Author contributions:** Hayman CV and Vyas D contributed to this paper; Vyas D designed the overall concept and outline of this manuscript; Hayman CV and Vyas D contributed to the discussion and design of the manuscript; Hayman CV contributed to the writing, and editing the manuscript, illustrations and review of the literature.
2. Original figures document was attached using PowerPoint and Word documents
3. PMID numbers and DOI numbers, if needed, were added to all of the citations
  - a. **Muto T**, Bussey HJ, Morson BC. The evolution of cancer of the colon and rectum. *Cancer*. 1975;36(6):2251-2270. [PMID: 1203876 DOI:10.1002/cncr.2820360944]
  - b. **Phaosawasdi K**, Cooley W, Wheeler J, Rice P. Carbon dioxide-insufflated colonoscopy: an ignored superior technique. *Gastrointest Endosc*. 1986;32(5):330-333. [PMID: 3095169 DOI:10.1016/s0016-5107(86)71877-4]
4. The references were ordered in the number they were present in the text. Reference numbers were superscript and brackets were added around the numbers

- a. In the 1960s, retrograde colonoscopy and endoscopic excision of polyps was developed in Japan to advance the visualization and removal of polyps from the entire large intestine<sup>[2]</sup>.