January 20, 2024

Lian-Sheng Ma

Editor-in-Chief

World Journal of Gastroenterology

Manuscript # 91187: "Review of Drug-Induced Mucosal Alterations Observed

During Esophagogastroduodenoscopy" by Iwamuro et al. (Number ID: 00070922).

Dear Dr. Ma:

We would like to resubmit our revised manuscript for consideration for publication in *World Journal of Gastroenterology*. We have carefully considered all of the comments of the reviewers and addressed the reviewers' concerns as thoroughly as possible. Point-by-point responses to the comments of the reviewers are given below. We hope you will find our revised manuscript suitable for publication in *World Journal of Gastroenterology*. Thank you for your consideration.

Sincerely yours,

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Manuscript #91187: "Review of Drug-Induced Mucosal Alterations Observed During Esophagogastroduodenoscopy"

Point-by-Point Responses to the Reviewers' Comments

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors:

This is a well-written review article that summarizes the recent advances in drug-induced mucosal alterations observed on esophagogastroduodenoscopy after searching a large number of literature. The author sorted out the classification and endoscopic manifestations of upper gastrointestinal mucosal injuries which provides a reference basis for clinical endoscopists to make diagnoses. It is helpful and useful in clinic. A few minor revisions are list below.

1. In the last paragraph, "first, it necessitates the modification of treatment plans for patients in whom drug-induced mucosal alterations are confirmed". But the differences in treatment caused by different drug injuries are rarely mentioned in the text. Can you summarize the related treatment difference?

Response: We thank the reviewer for taking the time to review our manuscript. In cases of drug-induced upper gastrointestinal mucosal injury, discontinuation of the causative medication is generally recommended. If discontinuation of the causative agent proves challenging, consideration should be given to dose reduction or transitioning to a medication with similar effects. Additionally, in the presence of lesions such as ulcers or erosions, acid-suppressing agents and mucosal protective agents may be administered. Therefore, a portion of the concluding statement has been removed, and the above content has been added.

2. Whether the possibility of mucosal damage is reflected in the instructions of these drugs will serve as a reminder for clinical non digestive specialists and manufacturers.

Response: Thank you for your valuable comments. Although we have not reviewed the package inserts of all drugs from other countries, among the upper gastrointestinal

mucosal lesions discussed in this review, including erosions and ulcers, and conditions such as olmesartan-induced diarrhea, information on these lesions is also documented in the Japanese package inserts. Nevertheless, the incidence of these lesions is not high, and despite their inclusion in the package inserts, the current situation is that not all prescribing physicians are well-versed in these conditions. Therefore, we believe that our current review is valuable even for such physicians. To incorporate these points, we have added a passage to the introduction.