

May 17, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 9913-review.doc).

**Title:** Same-day colonoscopy preparation with Senna alkaloids combined with bisacodyl tablets: A pilot study

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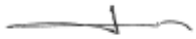
We would like to thank the reviewers for their clarifying questions. Here, I will try to answer the Reviewer's questions one by one:

1. The reviewer suggested that if we would emphasize the priority of Senna alkaloids compared to PEG and/or NaP, per-procedural data should be compared between alkaloids and PEG and/or NaP. However, this study is not a prospective comparative study, rather it is a retrospectively designed observational study. Due to the change of our practice of using bowel cleansing with two doses (night and morning doses of Senna alkaloids) to a single morning dose, we aimed to show the efficacy of same-day single dose Senna alkaloids in bowel cleansing. The results of our study showed that this regimen is an effective way of bowel cleansing for colonoscopy. Therefore, since this study is not designed to compare between the results of bowel cleansing with the alkaloids and PEG and/or NaP, we can't make any deduction for the comparison.
2. The recommended volume of drinking water is 1.5 L in our study. However, the regular drinking water suggestion with PEG cleansing is 4 L. Although there are some recent studies with reduced volume of drinking water of circa 2 L for bowel cleansing with PEG, the efficacy still remains controversial. Therefore, we believe that the amount of water suggested to be drunk during bowel cleansing in our regimen is more easily tolerated.
3. Revision has been made according to the suggestion of the reviewer (indicated amendments on the text and Table 2). Sentences 'Five patients out of seven with premature withdrawal of colonoscopy didn't follow the protocol completely and expected to be "not clean" prior to the procedure. Colonoscopy was abolished prematurely due to the insufficient bowel preparation as expected. The bowel preparation was insufficient in remaining two patients attributable to their persistent constipation (2.8%).' were added in the end of Results section in an effort to explain the true efficacy of the protocol. These results were also added in table 2. Also, sentence 'Premature withdrawal due to the insufficient bowel preparation in protocol patients was 2.8% (n=2).' was added in Abstract - Result section.

4. The manuscript has been revised for its language and the indicated amendments on the text were done.

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

Sincerely yours,



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