

ANSWERING REVIEWERS



Juli 22, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: AMEpc3160_locked for submission).

Title: More patients should undergo surgery after sigmoid volvulus

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Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: [11801](#)

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

1 We have provided a language certificate.

2 Careful considerations has been made according to the suggestions of the reviewer

(2) number: 02731924

The typical western patient with sigmoid volvulus is elderly with a neurological disease, tendency to chronic constipation and defined as a high risk patient with ASA classification 2-4. Some of the clinical scenarios for conservative treatment were severe comorbidity, dementia, relatives or patients request. Some patients had recurrence 4-5 times without mortality or surgery. Their frequent admissions to the hospital may have influenced the surgeon's perspective of sigmoid volvulus and its treatment.

A guideline for which patients should undergo surgery would indeed be ideal. However it is not readily made and an algorithm to distinguish between intervention or not is beyond the scope of this paper. This study is small and there are several reasons for not undergoing surgery. But even though some patients would not be fit for surgery it is interesting to note that the 30-day mortality was zero in the small group of patients that was operated when they had their recurrence. These patients were all ASA 3-4 and elderly and therefore high risk patients. In a potential guideline these high risk patients might be considered inoperable which might not be the case. Our recommendation is still that more patients should undergo surgery as the long term survival is better. The individual surgeon must have this in mind while making the difficult decision to resect or not.

3 The COMMENTS section has been written in accordance to guidelines.

4 The original figures have been uploaded.

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

Sincerely yours,

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