

September 15, 2020

Dear World Journal of Gastroenterology Editorial Team,

We would like to respectfully submit our revised manuscript entitled “Escalating complexity of cannulation in tertiary care center ERCPs over the last decade, with increasing reliance on advanced cannulation techniques” for consideration for publication in the World Journal of Gastroenterology.

Please see point-by-point responses to editorial and reviewer comments below, and please let us know if further revision is needed.

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: This is an interesting summary focusing on escalating complexity of cannulation in tertiary care center ERCPs over the last decade. The text was strictly logical, this phenomenon emphasized the importance of homogeneous training of ERCP endoscopists.

We thank the Reviewer for these comments in support of our manuscript. We have further emphasized the point of the need for homogenous training of ERCP endoscopists in the manuscript.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: Accept comments: In recent years, patients undergoing endoscopic retrograde cholangiopancreatography (ERCP) have increasingly required advanced cannulation techniques. In this manuscript, the author retrospectively analyzed the clinical variables and records of patients who underwent ERCP over the past decade. They found that in the past 5 years, the cannulation complexity of ERCP has increased dramatically, and more elderly patients and patients with malignancies require advanced intubation techniques. This may indicate that more experienced endoscopists need to be trained out to perform these complex operations. I personally support the publication of this manuscript in the World Journal of Gastroenterology.

We thank the Reviewer for these shared perspectives and comments in support of our manuscript.

Science Editor Comments (action items underlined>

1 Scientific quality: The manuscript describes a retrospective study of the escalating complexity of ERCP over time. The topic is within the scope of the WJG. (1) Classification: Grade C and Grade C; (2) Summary of the Peer-Review Report: This is an interesting summary focusing on escalating complexity of cannulation in tertiary care center ERCPs over the last decade. The text was strictly logical, this phenomenon emphasized the importance of homogeneous training of ERCP endoscopists; and (3) Format: There are 7 figures. A total

of 35 references are cited, including 5 references published in the last 3 years. There are no self-citations. 2 Language evaluation: Classification: Grade B and Grade B. 3 Academic norms and rules: The authors provided the Biostatistics Review Certificate, and the Institutional Review Board Approval Form. Written informed consent was waived. **The authors need to provide the signed Conflict-of-Interest Disclosure Form and Copyright License Agreement.** No academic misconduct was found in the Bing search. The CrossCheck results showed the similarity to be high. According to our policy, the overall similarity index should be less than 30%, and the single-source similarity should be less than 5%. Please rephrase these repeated sentences.

4 Supplementary comments: This is an invited manuscript. The topic has not previously been published in the WJG. The corresponding author has not published articles in the BPG.

We thank the Science Editor for this detailed review of the manuscript. The signed Conflict-of-Interest Disclosure Form and Copyright License Agreements have been uploaded into the system.

5 Issues raised:

(1) I found no "Author contribution" section. Please provide the author contributions;

We thank the Science Editor for this comment and have now included an 'Author Contribution' section (p. 2).

(2) I found the authors did not provide the original figures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor;

We thank the Science Editor for this comment and have now included all figures in PowerPoint format as advised to ensure that reprocessing can be performed.

(3) I found the authors did not add the PMID and DOI in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout;

We thank the Science Editor for this comment and have now revised the reference format to include PMID and DOI (when available) in the reference list for all references, and have modified the format to be in full compliance with the World Journal of Gastroenterology reference format (p. 14-16).

(4) I found the authors did not write the "article highlight" section. Please write the "article highlights" section at the end of the main text; and

We appreciate this Editorial comment and have now included an 'article highlights' section at the end of the main text as advised (p. 13)

(5) the author should number the references in Arabic numerals according to the citation order in the text. The reference numbers will be superscripted in square brackets at the end of the sentence with the citation content or after the cited author's name, with no spaces.

We thank the Editor for this comment. We have modified the format to be in full compliance with the World Journal of Gastroenterology reference format (p. 14-16).

6 Re-Review: Required.

7 Recommendation: Conditionally accepted.

We are most appreciative of your consideration of our work.

Sincerely yours,

Subhas Banerjee, MD
Director of Endoscopy
Professor of Medicine
Stanford University Medical Center