

Answering Reviewers

Name of journal: World Journal of Clinical Cases

Manuscript NO: 53805

Title: Management of peroral endoscopic myotomy for gastrointestinal motility disorder

Response:

Reviewer's code: 02954782

Thanks to the reviewer's acknowledgement of our work. We really appreciate that. We have shown the interpretation of abbreviation below the table in the revision.

Reviewer's code: 03478442

Thanks to the reviewer's suggestions and questions. We would like to change the title, but it seems that the title could not be modified on the author system. We have added schematic diagrams of common procedures at the end of the article to help understand the surgery steps. As our center does not carry out all the techniques mentioned in the manuscript, it is hard for us to show endoscopic photos of them.

As for the questions about the O-POEM, we do not consider O-POEM to be required for all patients with achalasia. O-POEM is mainly suitable for patients with severe submucosal fibrosis (such as after Heller myotomy or sigmoid esophagus) because it is difficult to establish a submucosal tunnel for such patients. Using O-POEM does not need to establish a tunnel and directly separates tissue for myotomy. Compared with traditional POEM, it has the advantages of simplicity and speed. O-POEM might lead to potential infection-related AEs. Therefore, prophylactic antibiotics and postoperative gastrointestinal decompression should be routinely applied to prevent possible infection. The mucosal defect will close by itself. Related details of the procedures had been added in the revision.

Detailed description of potential complications has been added in the DISCUSSION part. "As for the potential complications, infection and perforation are main potential complications for O-POEM. Prophylactic antibiotics and postoperative gastrointestinal decompression could help with possible infection. The perforation is mainly related to the operator's technology. It is still recommended that doctors with rich traditional POEM surgery experience perform O-POEM operation. The main complication of Dual-POEM and double-O-POEM is the reflux problem. According to current experience, the reflux that occurs in these patients is relatively light (the proportion of A-grade esophagitis will be larger, and rarely C Grade or above).

And the incidence of esophagitis is equivalent to that of traditional POEM. PPI treatment can achieve good results, and no case requires additional fundoplication. Some scholars [48] proposed adding fundoplication to the classical POEM procedure to reduce gastroesophageal reflux.”

Reviewer’s code: 02941507

Thanks to the reviewer’s suggestion. As we are not native English speakers, we had already got the manuscript edited for proper English language by professional editors at MedSci. We will proofread this article again to solve this problem.