

Dear Editors and Reviewers:

Thank you for your letter and for the reviewers' comments concerning our manuscript entitled "**Evaluating the efficacy of Endoscopic sphincterotomy on biliary-type sphincter of Oddi dysfunction: a retrospective clinical trial**" (ID: 68151). Those comments are all valuable and very helpful for revising and improving our paper, as well as the important guiding significance to our researches. We have studied comments carefully and have made correction which we hope meet with approval. The main corrections in the paper and the responds to the reviewer's comments are as flowing:

Responds to the reviewer's comments:

Reviewer #1:

1. Response to comment: some questions with this manuscript as shown below: 1. The authors should describe the introduction based on references. 2. The introduction and discussion are somewhat redundant. 3. There are too many tables. Please delete and simplify some of them. 4. Please describe the strength and limitation in this study. 5. The authors should describe when drainage tubes were retrieved as this might influence the outcomes. 6. Please reconsider the title. It sounds strange, and please correct the abbreviations. 7. The description of equipment and consumables was incomplete.

Response:

Question 1: It has been corrected, the original introduction is simplified, and the introduction is described according to the reference.

Question 2: It has been corrected, and the introduction and discussion parts have been streamlined.

Question 3: It has been corrected, and it has been deleted and changed to 10 tables.

Question 4: At the end of the discussion, the advantages and limitations of the research have been added. This item.

Question 5: This description has been added to the operating procedure and postoperative treatment part of the study and the Biliary-type SOD diagnosis and treatment part.

Question 6: The title of the article has been revised and changed to: Evaluating the efficacy of Endoscopic sphincterotomy on biliary-type sphincter of Oddi dysfunction: a retrospective clinical trial. The abbreviation has been corrected.

Question 7: Modifications have been made to the Equipment and consumables section.

Reviewer #2:

Response to comment:some questions with this manuscript as shown below: 1.It is very difficult to accurately diagnose SOD with FGID. 2.This paper shows the therapeutic effect of EST alone on SOD, but there is no result showing the effect of post-EST drug therapy according to the type of SOD. Please provide detailed data on this point.

Response:

Question 1:Indeed, the FGID and SOD are both functional diseases. In the article, the Methods section mentioned that “According to the impression of the endoscopist's first visit to the patients, the gastrointestinal endoscopy and other auxiliary examination tools were used for diagnosis”. However, this article is a retrospective trial, and it is still difficult to diagnose patients with biliary SOD combined with FGID. This is the shortcoming of this article.

Question 2: In this study, for SOD patients who were treated with drugs after EST treatment, 11 SOD patients with FGID and abdominal pain recurred after EST treatment in this study. The remaining 68 SOD patients have good curative effects after EST and no drugs treatment. In the results section of the article, the content of drug treatment after EST has been revised and described in detail.

Finally, the "Article Highlights" section is added at the end of the article.

We tried our best to improve the manuscript and made some changes in the manuscript. These changes will not influence the content and framework of the paper.We appreciate for Editors/Reviewers’ warm work earnestly, and hope that the correction will meet with approval.

Once again, thank you very much for your comments and suggestions.

Yours sincerely,

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