

ANSWERING REVIEWERS



April 2, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 2502-review.doc).

Title: Extracorporeal continuous portal diversion plus temporal plasmapheresis of “small-for-size” syndrome

Author: Peng Hou, Jingwang Tan, Chao Chen, Yuliang Tu, Ziman Zhu, JiaHong Dong

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 2502

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

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

reviewer 1: This study aimed to investigate the effect of two blood purification modalities on animal PLF or SFSS (ECPD) model. This kind of research is very important for clinical patients. But two groups in study were not comparable in many key factors. Observation period is very short, most parameters is temporal, not solid data in pathogenesis and survival data is lacked in the study. So it is very difficult to evaluate the values for postoperative liver failure (PLF) or “small-for-size” syndrome (SFSS) in animal. In addition, statistical analysis methods should be reconsidered for data at different time.

Response to Reviews:

Thank you for your advice. In this study, we aimed to compare the method of PP plus ECPD via portal vein with the method of PP via jugular vein in SFSS model. Especially we focused on the important role of ECPD playing in treating SFSS model. Thus, animals were divided into two groups: Portal group in which group animals received PP aided by ECPD and Systemic group in which group animals received PP only. In both groups, animals all received temporal PP from 24h to 30h PH, In this sense two groups were comparable.

In this study, we focused on the hemodynamic and liver tissues changes of PP plus ECPD via portal vein in SFSS model. Considering hemodynamic changes are temporal, so we continuous monitored these hemodynamic parameters and other parameters at a series of time points in order to clarify the truth in

SFSS model responding to PP plus ECPD or only PP. And the animals were sacrificed at 49-50h PH to get the liver tissues data so we did not get the survival data. However, considering the advantage of PP plus ECPD via portal vein which significantly diverted portal venous flow and attenuated sinusoidal endothelial injury in SFSS model, we are confident it will prolong the survival of SFSS. Thus in future, we will do another experiments to confirm it.

reviewer 2: The manuscript entitled "Extracorporeal Continuous portal diversion plus temporal plasmapheresis of "small-for-size" syndrome via portal vein access in porcine" by Dong et al. The topic is interesting and the structure of the manuscript is clear. However, there are still some major flaws that need to be addressed.

(1).There are some mistakes throughout the manuscript, more careful proofreading are highly recommended.

Response to Reviews:

Thank you for your advice. We had revised the manuscript and corrected many mistakes as carefully as we can according to your advice. Please refer to "2502-review".

(2).Plasmapheresis and other plasma purification modalities have been used in the past to treat postoperative liver failure (PLF) or "small-for-size" syndrome(SFSS) . However, None of them have shown a significant improvement of survival. We can not see a survival advantage in the paper.

Response to Reviews:

Thank you for your suggestion. This is a good idea which we are also interested with. It's a pity that in this study the animals were sacrificed at 49-50h PH to get the liver tissue data so we did not get any survival data. However, considering the advantage of PP plus ECPD via portal vein, we are confident it will prolong the survival of SFSS. In future, we will do another experiments to confirm it.

(3).Time point does not look uniform.

Response to Reviews:

Thank you for your suggestion. I have revised it according to your advice.


3 References and typesetting were corrected

I am very sorry and upset that I made some spelling mistakes and grammatical errors which took your more time to look through it. This time I tried my best to find these mistakes and revised them according to your advice. Maybe there are still some grammatical errors in my paper which I did not find. It will be

very kind of you to point them to me so I can revised all of them.

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

Sincerely yours,

A handwritten signature in Chinese characters, which appears to be '谭景旺' (Tan Jingwang), written in a cursive style.

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