Format for ANSWERING REVIEWERS

July 25, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 3755-review.doc).

Title: Magnetic endoscopic imaging versus standard colonoscopy: Meta-analysis of randomised controlled trials

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Name of Journal: *World Journal of Gastroenterology*

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The manuscript has been improved according to the suggestions of reviewers:
1 Format has been updated
I have finished the updated.
2 Revision has been made according to the suggestions of the reviewer

(1) Although colonoscopy supported by MEI was first reported in 1993, the technique has not been widely adopted, either because it is expensive or because gastroenterologists are uncertain of its benefits.

First thank you for your advices. Then because the MEI is expensive, we can not adopt it widely, maybe just use it in some special hospital. In order to assess its benefits and to compare the efficacies of the MEI and SC, I have finished this manuscript.

(2) there was variation in the type of MEI equipment in the various studies. This is noted in the Discussion but not in the Materials and Methods.

Equipment type

The instruments used in the trials included:the Olympus CF-1T200L scope (160cm)[10,11], the ScopeGuide endoscope insertion tube system[12-13,15], the Olympus CF-Q160DI with the Olympus ScopeGuide system[9,14], the Olympus CF-Q180AL, the Olympus CF-Q160AL and the CF-Q140DL/I with the Olympus ScopeGuide system

(3) Table 1 is long and complex. This will be confusing to most readers but a short table summarizing the various studies may well be appropriate.

I agree that the Table 1 is a little complex. But the content of the all Eight randomized controlled trials (RCTs) are abundant such as study, year, country, number of patients(n) endoscopists' experience leve, colonoscope types, cecal intubation rate, cecal intubation time, sedation dose pain score and ancillary maneuvers. I just want to assess the MEI entirely.

(4) There is some confusion in relation to the Results section, the figures and the legends. Figure 2 appears to refer to cecal intubation times (3 studies). The results appear to favour standard colonoscopy although the Results section indicates “no significant difference”. Figure 2 is mislabelled “cecal intubation rate, inexperienced”. Figure 4 also

appears to be misleading. In the figure, there does not appear to be any significant difference between the two groups but the Results section says that "cecal intubation was obviously higher with MEI"

I am so sorry that there are some mislabeling figures in the manuscript. I have already revised the figures. Figure 2 is mislabeled, so the results appear to favour MEI. MEI showed higher cecal intubation rates in comparison with the standard colonoscope, but did not have any distinct advantage over the standard colonoscope in terms of cecal intubation time. And the cecal intubation rate for inexperienced endoscopists was higher in patients randomised to MEI than in the standard group in the revised figures.

(5) There are a number of spelling and grammatical errors.

According to your points, a native speakers of English already revised the spelling and grammatical errors in the manuscript

(5) The authors list the general results on the listed outcomes. However, they do not give an idea of the general trend of the outcomes from the studies. I agree that the data cannot be about the overall results. E.g. one could comment MEI did not lower pain scores (8 studies) etc.

Due to the differences in the scales, we did not pool the data for these studies. So that I can give a general result that is "MEI did not lower pain scores in general trend."

3 References and typesetting were corrected

I have finished the References and Typesetting.

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

Sincerely yours