

ANSWERING REVIEWERS



Jan 1, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 7312- review.doc).

Title: Does hyoscine butylbromide really improve polyp detection during colonoscopy? A meta-analysis of randomized 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

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

- (1) You wrote that adverse effects of the drug are unusual. But tachycardia is common and could be important in some patients. Please specify adverse effect and add that it is necessary to monitor patients during endoscopy.

Response: Thank you for your advice. We described adverse effects of the hyoscine butylbromide in the section of introduction.

- (2) Your literature search could be incomplete, it is necessary to try also "buscopan and polyp detection".

Response: We agree with your comments. We had plus "buscopan and polyp detection" in the literature search. However the result is similar with our previous MS.

- (3) However I feel that the topic is not of very high relevance. At the end of conclusions it is stated that antispasmodic drug was administered just after intubation of cecum. At that moment the individual endoscopist can choose how to manage the particular case, if inject or not the drug, on the basis of considerations about the particular patient and its own experience. Anyway it is not clearly stated if in any of the study analyzed hyoscine butylbromide was injected at the moment of cecum intubation.

Response: As we showed in the revised version of our MS. Hyoscine butylbromide was injected at the moment of cecum intubation in all studies which were included in our meta-analysis. The time of drug intervention had been listed in table.2.

- (4) My suggestions are as follows: 1. In the session on Study selection: " When a publication duplication occurred, or..." please change to " When a publicational duplication occurred, or..." 2. In the session on Limitation: ", so further large multicenter studies based on unified colonoscopy

procedure ... " please change to ", so further large multicenter studies based on unified colonoscopy procedure ...".

Response: These had been corrected in the revised MS.

- (5) In the session on Secondary Outcome: the authors mentioned "A total of 539 patients found adenoma on colonoscopy." Were carcinomas excluded in the secondary outcome?

Response: Carcinomas were excluded in the secondary outcome in our meta-analysis. At first we supposed to analysis the carcinoma detection rate. However only two trials showed the data and the definition of advanced lesions was different between them.

- (6) In the session on Limitation: the authors mentioned "The small number of studies and the restricted sample size of most trials implied that the quantitative analysis was not very powerful". How many samples does this study need?

Response: We think that as a meta-analysis, it should include relevant literatures and patients as much as possible to make the conclusions more convincing. Although totally 1998 patients were included, the sample was relatively smaller compared with those in other extensive systematic reviews.

- (7) In the session on Conclusion: Polyp detection is associated with multiple factors excepted administrating antispasmodic agents. However, the authors mentioned that no statistically significant benefit of hyoscine butylbromide use for improving the polyp detection rate during colonoscopy. Is this result true?

Response: We think that your comments are of great importance. This had been corrected in the revised MS.

3 References and typesetting were corrected

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

Sincerely yours,

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