

Birger Michael Breum MD

Hvidovre Hospital - University of Copenhagen
Kettegaards Allé, DK-2650 Hvidovre, Denmark
Tel.: +45 29820219, E-mail: articles@breum.dk

Dear Editor,

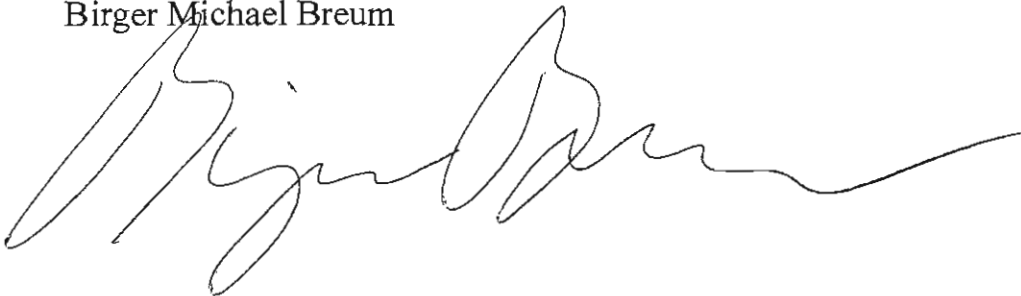
We are very pleased that you find the manuscript "Accuracy of abdominal auscultation for bowel obstruction. (was: 150 years of bowel sounds - have we heard enough?)" with the corrections suggested by the aditor and the reviewers, may be suitable for publication in World Journal of Gastroenterology.

We appreciate the comments from the reviewers and editor and we have done our best to make the necessary changes and amendments.

We have provided a detailed point-by-point reply to the editor's and each reviewer's comments, including the resulting changes to each point in the revised manuscript. Furthermore, all changes are highlighted in the revised manuscript.

We hope that these changes will be sufficient.

Best regards, on behalf of the authors,
Birger Michael Breum

A handwritten signature in black ink, appearing to read 'Birger Michael Breum', with a long horizontal flourish extending to the right.

Title: Accuracy of abdominal auscultation for bowel obstruction. (was: 150 years of bowel sounds - have we heard enough?)

Authors: Breum BM, Rud B, Kirkegaard T, Nordentoft T

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 14464

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

1 Format has been updated as requested

2 Title was changed as requested

3 Revision has been made according to the suggestions of each reviewer

(1) Reviewer 30205 remarks:

This is a well preformed study with clinically interesting results. The authors just need to point out that only obstructive bowel disease was assessed and not paralytic ileus. And that no repeated assessments on the same patients were preformed that may reveal pathology if there is a change in bowel sounds.

Authors reply:

Thank you for the kind words.

Discussion now point out that only obstructive bowel disease was assessed and not paralytic ileus. And that no repeated assessments on the same patients were preformed that may reveal pathology if there is a change in bowel sounds.

(2) Reviewer 9292 remarks:

This is a good paper on an interesting topic. The work is well done, has a solid statistical basis and comes to interesting conclusions. The only suggestion I would give is to add a few sentences in the discussion on the possibility that the diagnostic value increases with the addition of history and clinics and systematic training of the operators.

Authors reply:

Thank you for the kind words.

Discussion now has a few sentences in the discussion on the possibility that the diagnostic value increases with the addition of history and clinics and systematic training of the operators.

(3)Reviewer 227589 remarks:

The submitted original research manuscript evaluates the use of auscultation in the diagnosis of bowel obstruction. The authors provide compelling evidence that the common use and in some cases sole reliance on auscultation for bowel obstruction is not warranted. A few minor issues should be addressed by the authors. Under Sound preparation the authors state that 3 recorded segments each of 6 second length were used to assemble the sound recording for the observers. This would add up to 19.5 second given a half second pause between each 6 second interval. This does not agree with the statement of a 25 second long recording - please clarify throughout the manuscript (later on the length is stated as 24 seconds). The authors use a Mann-Whitney U test when comparing the median of patients with pathological findings - this is not mentioned in the statistical section and should be included since it does not follow a normal distribution paradigm like the paired t-test used later when comparing the ratings between observers. I recommend publication of the manuscript once these minor issues have been addressed.

Authors reply:

Thank you for the kind words.

The 3 chosen out of the recorded 6 segments are each 8 seconds long. 2 breaks of half a second (no break before the first or after the last sound). $8 + \frac{1}{2} + 8 + \frac{1}{2} + 8 = 25$ seconds.

Thank you for pointing out that the sound sequence is 25 seconds and not 24 seconds as we wrote in one place. This has been changed now. The observer listened to 24 seconds of bowel sound and 1 second of silence, so the sequence is 25 seconds. Mann-Whitney U test is now mentioned in the statistical section.

4) typesetting was corrected as requested

5) Documentation for professional English language editing supplied

6) References were corrected as requested