May 24, 2018

Dear Editor,

Pleased find enclosed the edited manuscript in Word format (file name: 38999. edited.doc)

Title: New horizons in the EUS-based diagnosis of pancreatic cystic lesions

Authors: María-Victoria Alvarez-Sánchez, Bertrand Napoléon

Name of journal: World Journal of Gastroenterology

Manuscript Nº: 38999

We thank the feedback of the reviewers and we appreciate their comments. We have mended the manuscript according with their suggestions.

1.- Revision has been made according to the comments of the **reviewer 03647581**:

- The he first paragraph has been improved showing the limitations of the current guidelines and following with the emergence of new technologies assisting physicians in the diagnostic workflow of pancreatic cystic lesions.

- The recommendation on the use of CH-EUS by the International and European guidelines has been incorporated into the discussion.

- Motivation has been merged with the background highlighting the easier availability and longer learning curve of EUS based innovations.

2. – Revision has been also made according to the suggestions of the **reviewer 02438659:**

- The tittle has been modified according with your suggestion.

3. – Response to **reviewer 03024915**:

- The tittle has been modified according with your suggestion

- “Pancreatic cysts” has been replaced by “pancreatic cystic lesions” everywhere in the manuscript except for the term of search in literature where we used “pancreatic cyst” or in the tittle of the studies in the references section.

- The different discussion sections have been merged into a sole discussion at the end of the manuscript.

4. – Response to **reviewer 03479389**:

- Needle tract seeding has not been reported in any study or case report using one of these new technologies which involve pancreatic cyst puncture. This is logical because whereas EUS-FNA is commonly accomplished in pancreatic cysts overtly malignant where none of these EUS based technologies is required to reach the diagnosis, these EUS-based technologies are usually performed in pancreatic cysts with unknown nature and without malignant features to characterize the type of cyst and to assess the malignant potential.

5. – Response to **reviewer 02468626**:

- The text has been shortened.

- We have removed part of the previous background and we have merged the background, the motivation and the objectives into the introduction section.

- The motivation section was included because it was a required item in the instructions of the journal invitation for the new column “Topical review”. Now we have removed this section.

- Contrast enhanced endoscopic ultrasound has been replaced by contrast harmonic enhanced endoscopic ultrasound everywhere in the text.

- The third and fourth topics have been shortened.

- The different discussion sections have been merged into a sole discussion at the end of the manuscript.

- Table 1 has been removed

- We have proposed at the end of the discussion a diagnostic flowchart integrating the most established techniques- CH-EUS and nCLE

- At the end of the introduction we highlight that omics technologies and biomarker analysis in cystic fluid are beyong of the scope of the article.

Sincerely yours,

María-Victoria Alvarez Sánchez, MD

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