

Response to Reviewers

Dear WJG® Editorial Office:

I feel honored to have the opportunity to revise the manuscript entitled “Surgical Management of Zollinger–Ellison Syndrome: Classical Considerations and Current Controversies”. I hope this revision would fulfill the criteria of publication. If there is any question, please feel free to contact me at any time.

We added the point-by-point response to reviewers and editorial comments as follows. Besides, one of the reviewers grade the **LANGUAGE QUALITY** as “Grade B: Minor language polishing” and the other as “Grade C: A great deal of language polishing”. I have asked **American Journal Experts (AJE)** company to check our manuscript and remove any English language errors. Please see attachment for the **Non-Native Speakers of English Editing Certification** in the submission system. Besides, the **author list** of this paper should be “Qian-Qian Shao, Bang-Bo Zhao, Liang-Bo Dong, Hong-Tao Cao, Wei-Bin Wang*, Yu-Pei Zhao*” (with Wei-Bin Wang and Yu-Pei Zhao as co-corresponding authors). I failed to list it correctly in the submission system and I have revise this mistake.

COMMENTS TO AUTHOR:

Reviewer 1:

The review entitled “Surgical Management of Zollinger–Ellison Syndrome: Classical Considerations and Current Controversies” is well presented. In this study, the authors have described surgical treatment algorithm for Zollinger–Ellison syndrome and some recommendations in sporadic cases. This is an informative and valuable study. This study is very useful to clinicians. A few comments to the authors:

1) ABSTRACT: *Instead of ZES, the complete term “Zollinger–Ellison syndrome (ZES)” should be used for the first time. “Background: ZES is characterized by gastric acid hypersecretion causing severe recurrent acid-related peptic disease.”*

Thanks for this suggestion. I have made a revision to the abstract. Please see Page 2, Line 2.

2) ABSTRACT: *Instead of MEN1/ZES, the complete term “multiple endocrineneoplasia type 1-related ZES (MEN1/ZES)” should be used for the first time. “(ii) For MEN1/ZES, surgery should not be performed routinely except for lesions>2 cm.”*

Thanks for this suggestion. The “MEN1/ZES” has been instead by the complete term “multiple endocrineneoplasia type 1-related ZES (MEN1/ZES)”. Please see Page 2, Line 14-15.

3) There is a need to incorporate the newer developments with respect to the surgical treatment of Zollinger–Ellison syndrome, published during the period 2017-2019.

Thanks for this comment. I have updated the references and added newer papers published during the period 2017-2019. Please see Page 10-16.

4) The reference numbers should be superscripted in square brackets at the end of the sentence.

Thanks for this suggestion. All of the reference numbers have been superscripted in square brackets at the end of the sentence.

5) There are minor grammatical and formatting mistakes that should be corrected.

Thanks for this comment. I have asked American Journal Experts (AJE) company to check our manuscript and remove any English language errors. I have uploaded the service certificate in the submission system.

Reviewer 2:

1. Abstract section should be remade. Abbreviations for ZES and MEN1 should be clarified.

Thanks for this suggestion. I have made a revision to the abstract. Please see Page 2, Line 2, 14-15.

2. Liver resection for metastases has therapeutic effect as mass reduction, even if tumors of >90-95% was resected. Even though reliable prospective study is lacked, some papers recommended aggressive liver resection, not liver trasplantation. This point should be added.

Thanks for this profound comment. I have added this point in the menascript in Page 8, Line 24-27.