

Reply to Reviewers

23 March 2020

Name of Journal : World Journal of Gastrointestinal Surgery

Manuscript NO: 53693

Manuscript Type : Observational Study

Title of Study:

Short Term Outcomes of Minimally Invasive Selective Lateral Pelvic Lymph Node Dissection for Low Rectal Cancer

Dear Reviewers,

In the manuscript, the author evaluated the short-term outcomes of patients who underwent minimally invasive LPND during rectal cancer surgery. It's convincing that minimal invasive techniques for LPND are safe, feasible and able to achieve adequate nodal clearance though the cases were limited. It would be better to show some imaging of positive lateral nodes if possible.

We have attached images of positive lateral lymph node in the manuscript. Labelled as Figure 1, Figure 2 and Figure 7.

And about surgical techniques, whether diverting stoma was performed in cases of low anterior resection?

All patients who underwent chemoradiotherapy and low anterior resection had a diverting ileostomy performed at the same time. End colostomy was formed for patients who had abdominoperineal resection or Hartmann's procedure respectively.

FIGURES

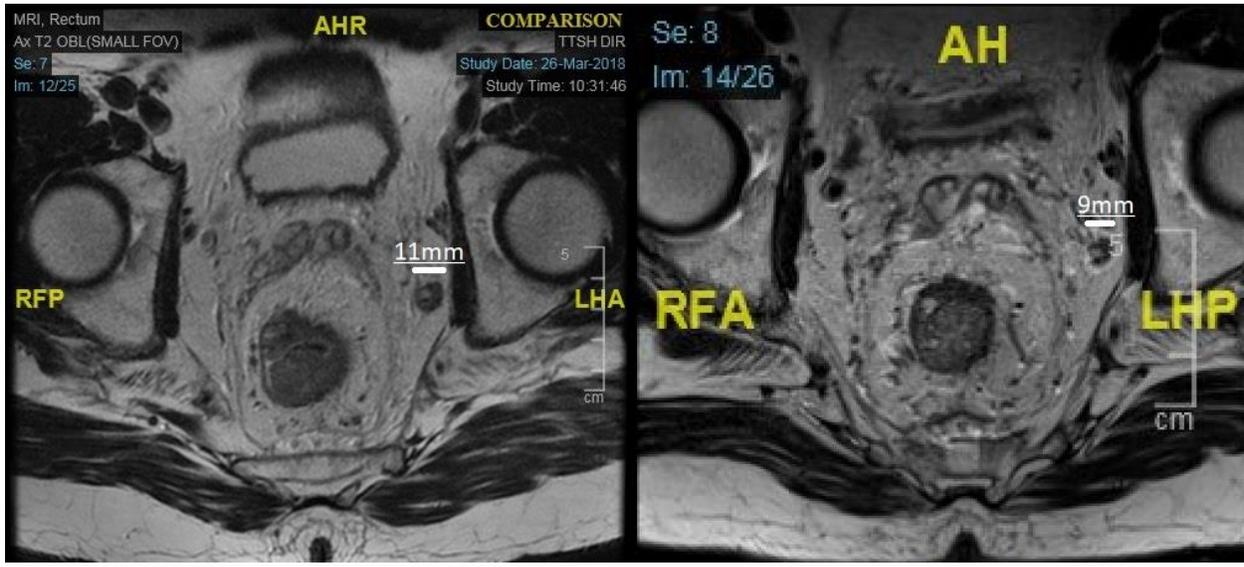


Figure 1 : MRI Rectum showing an enlarged, metastatic, left internal iliac node before (left, 11mm) and after (right, 9mm) neoadjuvant chemoradiation.

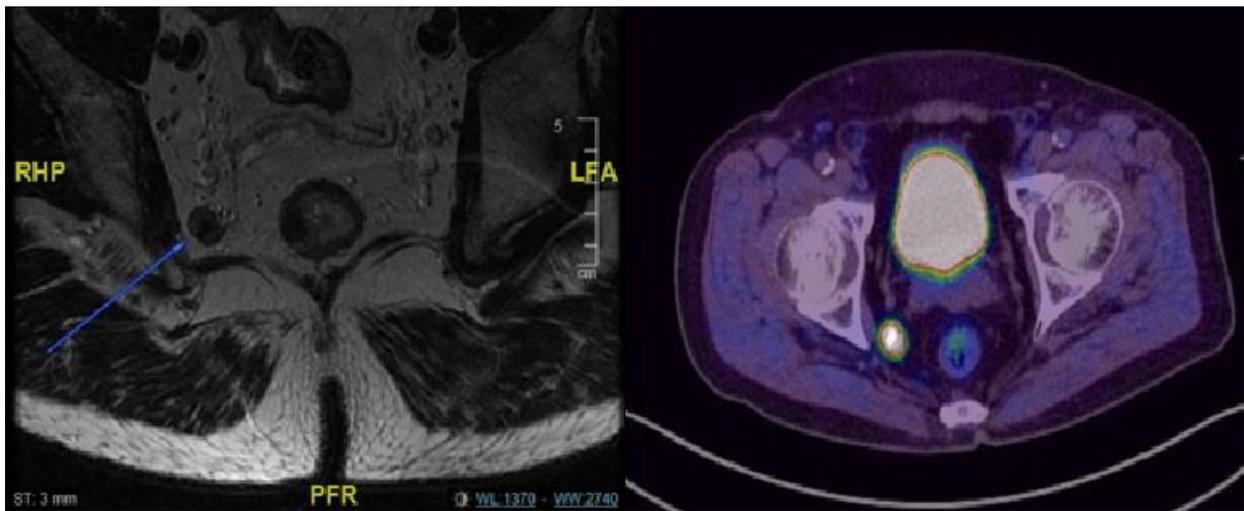


Figure 2: Metastatic lateral pelvic lymph node seen on MRI rectum and PET scan.



Figure 7: En bloc lymphofatty tissue and metastatic lateral pelvic lymph node

Sincerely,

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