

April 11th, 2020

Editors-in-Chief

World Journal of Gastrointestinal Endoscopy

Dear Professors Hu, Koulaouzidis, and Less,

Please find enclosed the revised version of our manuscript entitled “**Efficacy of various endoscopic modalities in detecting dysplasia in ulcerative colitis: a systematic review and network meta-analysis**” which is an invited manuscript (Invited Manuscript ID: 54799).

We have revised our manuscript according to the editor and reviewer’s comments.

1. The word "neoplasia" in the title may have to be replaced with "dysplasia" to reflect the focus of the report on the manuscript.

Thank you for your advice. We have changed neoplasia to dysplasia.

2. Did the dysplasia in this study include low-grade or high-grade dysplasia, or both? This must be stated in the manuscript.

Dysplasia were defined in each study as both low- and high-grade dysplasia, so we have added “(low- or high-grade)” in the abstract and the following sentence in page 7, Outcome Assessment, “Dysplastic lesions were defined as at least low-grade dysplasia per each study’s criteria.”

3. Many hospitals may not have high-definition endoscopic equipment. In this case, CE/NBI may be an option to improve the diagnosis rate. Therefore, why didn’t the authors include CE SD or NBI SD in this network meta-analysis?

That is an interesting point. In our search, the studies that used NBI or CE were all using HD scopes.

4. A major mistake: this study included 7 RCTs and cited them as references 33-43. However, references 33-43 were the studies reporting on eosinophilic esophagitis.

Thank you for pointing out this mistake. We have corrected the references. Additionally, while adding these references to the manuscript, we found that the two Ignjatovic's studies (Ignjatovic 2011 and 2012) were the same. We have deleted Ignjatovic 2011, which was an abstract. We have made changes to the Abstract, Figures and Results accordingly. NBI HD vs. WL HD would be 4 studies now, but the overall results and values of the outcomes are not much changed.

5. A minor mistake: In "Comparison of dysplasia detection rates per biopsy" section, the first sentence "A shown in Supplementary Figure 1A" should be corrected.

We have changed this to "As shown in..."

6. It should be figured out not only the direction of associated research, but the future clinical directions of the topic described in this field.

Thank you for your suggestion. We have added the following sentence in the end of the first paragraph of the Discussion. "Overall, the results of our study suggest that the use of a HD colonoscopy may be more important rather than the use of image enhancing in detecting dysplasia in patients with UC." The sentence in the last paragraph of the Discussion was changed to "WL SD consistently ranked worse compared to the other modalities suggesting the importance of using a HD colonoscopy." The last sentence in the Abstract was changed to "Further studies are needed, but NBI, CE, or WL may all be considered effective modalities, if performed with a HD scope, for surveillance in long standing UC."

I confirm that all authors have agreed to be listed on the manuscript, have seen and approved its contents, and have concurred with submission to *World Journal of Gastrointestinal Endoscopy*. The material submitted for publication has not been previously reported and is not under consideration for publication elsewhere.

We strongly believe that our findings are sufficiently important and valuable to be published in *World Journal of Gastrointestinal Endoscopy*. We would be grateful if the manuscript could be reviewed and considered for publication in *World Journal of Gastrointestinal Endoscopy*.

We look forward to hearing from you at your earliest convenience.

Yours sincerely,

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