

<p>Hôpitaux Universitaires de Genève</p> <p>Département de Chirurgie</p> <p>Service de Chirurgie viscérale</p>	
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April 17th 2015

Please find enclosed the edited manuscript in Word format (file name: Buchs WJCO editorial rev.doc).

Title: Robotic technology: optimizing the outcomes in rectal cancer?

Author: Nicolas C. Buchs

Name of Journal: *World Journal of Clinical Oncology*

ESPS Manuscript NO: 17213

The manuscript has been improved according to the suggestions of reviewers (all the changes are high-lightened in yellow):

- 1) Format has been updated
- 2) Revision has been made according to the suggestions of the reviewer

Reviewer 1:

This is an invited editorial by Dr. Buchs. The editorial is well written and concise summarizing robotic technology optimizing the patient outcomes in rectal cancer. The advances in the RS technology compared to open surgery experiences is discussed. Despite successes I would however like to see concisely the barriers and if possible challenges as well. Well done.

I would like to thank the reviewer for his nice comment. As asked by the reviewer, the challenges and barriers were expanded.

Reviewer 2:

Nicely written short piece on robotics in rectal cancer. Some of the statements are a bit opinioned and one should be careful not to be overly enthusiastic based on the technical fascination alone. Please give data on truly patient- and stage-matched results. Many data presented are from selected series, with good results accordingly. Concluding part is a bit overenthusiastic "with endless opportunities" etc.

This is an invited Editorial, and by definition it is based on opinions. However, we do agree with the reviewer that the data presented are selected. Too enthusiastic statements were removed.

What about learning curve? How does learning curve differ with large volume open surgery experience that convert to robot, vs those that go directly to robotic surgery with less open surgery experience? How will expansion of robotics influence this in the future? Maybe try to be a bit more critical (=reflective) as well - what are the barriers, challenges and way forward in the area?

Data regarding learning curve was added. However, the evidences regarding who will convert and won't, based on the experience is unknown. We might think that open surgeons who did not start laparoscopy, might be good candidates for robotic surgery (as were the urologists). This was added in the text. Again, barriers and challenges were more precisely described.

3) References and typesetting were corrected

Thank you again for publishing our manuscript in the *World Journal of Clinical Oncology*.

Sincerely yours,

Dr Nicolas Buchs, MD