Reviewer's report

Title: Different healing process of esophageal large mucosal defects by endoscopic mucosal dissection between with and without steroid injection in an animal model

Version: 1 Date: 26 January 2013

Reviewer: Nobuyuki Matsuhashi

Reviewer's report:

An interesting study.

Minor Essential Revisions

*Fig1B: Please indicate the area of the granulation tissue by ## arrow.

*Fig2A: In general, it is rather difficult to evaluate mild to moderate stenosis by endoscopy. Fig2A cannot rule out stenosis. Radiological examination would be much better to evaluate the stenosis. Therefore, adding data of esophagography is strongly recommended, which will greatly enhance the positive message of this article. Indeed, "Stricture formation was unremarkable" seems to be an exaggeration. The authors have to include discussion regarding this point.

*Fig5: Labels C and D are wrong.

*Table 1 should be changed into a Figure.

*The 3rd paragraph in the results section: The authors state "dilation ....was gently performed", but "gently" is not enough. They have to state the strength quantitatively (by atm etc.).

*The 1st paragraph in "Quantitative pathological findings" in Results section: Data are presented as (n=5) etc. Does "n=5" mean that 5 pigs were evaluated, or 5 sections in a single pig were evaluated? Please make it clear.

*The last paragraph in Results section: The authors have to present the thickness of the muscle in the steroid-treated pig.

*the 3rd paragraph in Discussion: The authors state ".human esophagus consists of the smooth muscle .....", but the human esophagus consists of both striated and smooth muscle.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being
published

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

The first author is going to work in the reviewer's institution 3 months later.