**Author’s response to reviews**

**Title:** A modified endoscopic submucosal dissection for a superficial hypopharyngeal cancer: A case report and technical discussion

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**Author’s response to reviews:**

Dear editor and reviewer,

Thank you for your works on our paper. We have revised the paper according to your suggestions.

For Editor Comments:

Please tone down your conclusions on the feasibility or safety of the presented method, as this is against our criteria for the consideration of case reports ([http://bmccancer.biomedcentral.com/submission](http://bmccancer.biomedcentral.com/submission) guidelines/preparing your manuscript/case report). Conclusions on safety and efficacy require stronger evidence than a case report can provide, hence you should simply describe your finding without inferring conclusion.

We have revised the conclusion. Please see the conclusion section of page 3 and the conclusion section of page 7. We have marked the revised section with yellow background.
For Reviewer’s comments

1. Great video. Could you record a voice over explaining what is happening please?

   It is good suggestion. We have done. Please see the attached video.

2. What were the final specimen margins on the final pathology? i.e distances closest to margins?

   We have made the description in the revised paper. Please see the line 12 to 15 of page 5 in the revised paper and Figure 6. We have marked the revised section with yellow background.

3. Was there any perineural invasion on the specimens?

   We have made the statement in the revised paper. Please see the line 12 to 15 of page 5 in the revised paper. We have marked the revised section with yellow background.

4. How was the neck managed? Neck Dissection?

   Because it is early hypopharyngeal cancer, type 0-Ila, 8x9mm, PT1a (LPM), squamous cell carcinoma, well differentiated, Ly0,V0,pHM0,pVM0, and cervical computed tomography (CT) showed no lymph node metastasis, it does not need to do neck dissection. This is reason what we use endoscopic submucosal dissection (ESD) to treat and it is also benefit of ESD.
5. Did the patient receive post-op RT?

Because it is early and well differentiated hypopharyngeal cancer, it does not need to do RT or chemical drug treatment after ESD according to the guidelines from NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) Head and Neck Cancers Version 1.2017 — February 6, 2017. http://www.nccn.org and NCCN Guidelines Version 1.2017 Cancer of the Hypopharynx. http://www.nccn.org. This is also benefit of ESD.

6. Figure 4 description: what is an anal margin?

We have made marks. Please see Figure 4 and its legend in the revised paper.

7. What are the indications/contraindications for this procedure?

We have made the description in the revised paper. Please see the line 8 to 12 of page 6 in the revised paper. We have marked the revised section with yellow background.

Thanks!

Yours sincerely!

Biguang Tuo