Author’s response to reviews

Title: Efficacy and safety of endoscopic submucosal tunnel dissection for superficial esophageal neoplastic lesions: a systematic review and meta-analysis

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Author’s response to reviews:

Dear Editors,

Thank you very much for your consideration of our manuscript for publication in the Journal of Cardiothoracic Surgery. We appreciate the helpful comments made by the Reviewers. After discussion among the co-authors, the manuscript was carefully revised to address all concerns of the Reviewers. Specific responses to the Reviewer’s comments are highlighted below and have been addressed in the revised manuscript.

Respond to Reviewer 1’ comments:

1. The authors should proof-read the manuscript to minimize typographical, grammatical, and syntax errors and checked all abbreviations which are defined. There are a lot of grammatical errors and nonstandard statistical words in this article.

Response to comment 1: Thank you for your suggestion. We contracted a native English speaker to revise the manuscript. All of the grammatical and spelling errors have been addressed. We trust that you will find the revised manuscript suitable for publication.
2. Most importantly, authors should revise the manuscript according to the criteria of the Journal of Cardiothoracic Surgery. For example, the Figures were very blurry and unclear. And the Figure Legend should be modified. Figure 2, 3, and 4 should include a whole description and then the description of each picture. What does it mean for "between two groups" in Figure 4?

Response to comment 2: As suggested, the manuscript has been revised in accordance with the author guidelines of the Journal of Cardiothoracic Surgery. Figures 2, 3, and 4 have been replaced with better quality images and the legends have been revised. The reference to two groups in Figure 4 refers to the endoscopic submucosal tunnel dissection group and the endoscopic submucosal dissection group.

3. In the paper, the author collected data for a total of 9 studies, but strangely, most of the studies came from China. Is the disease described in the study has a high morbidity in China? Or is there a special selectivity when the author chooses the studies to include the research? The author should focus on clarifying.

Response to comment 3: Thank you for your comment. Two reviewers (W. Peng and S. Tan) conducted a comprehensive literature search of the Pubmed, Embase, and Cochrane Library databases of all ESTD-related studies in November 2018. Although there was no bias in regard to the country of origin, most of the nine included studies were conducted in China. To address this issue, the following text was added to the Discussion section: “Linghu et al. applied this method for the first time in clinical practice in 2013 [28], during which all five patients with SENLs were successfully treated with ESTD with no serious complications or tumor recurrence during a mean follow-up duration of 7.4 months [28]. Since then, more and more clinical research of ESTD has been performed in China [17-20], which might explain why most of the studies included in this meta-analysis were conducted in China.”

4. There is quite different writing strategy between result and discussion section. There are a lot of repetitive description in discussion section, which should place in result section.

Response to comment 4: We agree with your comment and carefully revised the Discussion section accordingly.

Respond to Reviewer 2’ comments:

1. The authors presented a meta-analysis study of the Efficacy and safety of endoscopic submucosal tunnel dissection for superficial esophageal neoplastic lesions. This is an interesting study for those working in the field and I think it will be a helpful aid in that field. The manuscript needs to be revised for its English language as there are some grammatical mistakes. The tables and figures are well illustrated.

Response to comment 1: Thank you for your suggestion. We contracted a native English speaker to revise the manuscript. All of the grammatical and spelling errors have been addressed.
We trust that you will find the revised manuscript suitable for publication in the Journal of Cardiothoracic Surgery. We await your final decision.

Yours sincerely,

Xiaowei Tang