Dear Editor,

Please find enclosed the revised manuscript.

Title: Single-incision laparoscopic surgery to treat hepatopancreatobiliary cancer: a technical review

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The manuscript has been improved according to the suggestions of the reviewers (we sincerely thank the reviewers for the comments):

1. Format has been updated.

2. Revisions have been made according to the suggestions of the reviewers.

Reviewer 1:

This is a minireview concentrated in technical aspects of Single-incision laparoscopic surgery or SILS applied in hepatopancreatobiliary (HPB) diseases, especially in malignant diseases. This is a trending field in recent following years. The article was well-written with good, illustrated figures. However, the review concentrated too much on introducing laparoscopic instruments and contained only comparing short-term outcomes. Maybe, It’s more helpful if authors introduced more details of technique step-by-steps and how to overcome challenging maneuvers, as well as summarize oncological outcomes (primary results like number of lymph nodes resected, rate of positive margins, and secondary results like one-year recurrence rate, free-progressive survival, overall survival,...)

Response: The detailed information has been incorporated (On Page 6, Lines 20-25; Page 7, Lines 1-11; Page 11, Lines 10-13; Page 13, Lines 8, 20-23; Page 14, Lines 1-11, 18-20 in the revised manuscript).

Reviewer 2:

This paper mainly describes the application of Single-incision laparoscopic technology in hepatobiliary and pancreatic surgery, and shares the surgical experience of author’s team with us in the form of pictures and texts. It is a review worthy of promotion and has certain innovation and clinical value. However, the following points are worth discussing. Please inform the author in an appropriate form.

Suggestions:

1. Although Single-incision laparoscopy has many advantages, its disadvantages are still controversial, such as the safety of surgery, the radical cure rate of lesions and the convenience of operation. For operations such as cholecystectomy, Single-incision laparoscopy does not have many problems, but for major operations such as hemihepatectomy, partial pancreatectomy and biliary tract resection, whether Single-incision laparoscopy is really as safe as described by the author,
especially for the control and treatment of intraoperative bleeding. So we expect more cases and their prognosis.

Response: We agree with the reviewer. Therefore, we revised the descriptions in the “CONCLUSION” section (On Page 15, Lines 5, 11 in the revised manuscript).

2. It is suggested that the author increase the short-term and long-term efficacy of Single-incision laparoscopic technique in the literature review, because the treatment without talking about the efficacy is a failure.

Response: The short-term and long-term outcomes of single-incision laparoscopic procedures have been incorporated into the literature review (On Page 6, Lines 20-25; Page 7, Lines 1-11; Page 11, Lines 10-13; Page 14, Lines 18-20 in the revised manuscript).

3. Pictures also need to be processed by professionals.

Response: We have provided decomposable figures (in which all components are movable and editable) and organized them into a single PowerPoint file according to the Editor’s comments.

4. The language needs further modification.

Response: The manuscript has been sent to a professional English language editing company for language polishing.

3. References and typesetting have been corrected.

4. Video 1 has been added to the manuscript (On Page 13, Lines 8; Page 33).

Thank you again for considering our manuscript for publication in the World Journal of Gastroenterology.

Sincerely yours,

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