

World Journal of Gastroenterology (WJG)

Manuscript No. 47677

Dear Reviewers

Thank you so much for the time and effort during the review process. Authors appreciate it. We are submitting revision of our manuscript titled "Bilateral versus Unilateral Placement of Metal Stents for Inoperable High-Grade Hilar Biliary Strictures: A Systemic Review and Meta-analysis." With all the corrections as mentioned below:

Reviewer comments:

Reviewer 1 comments:

Reviewer Name: Anonymous
Review Date: 2019-03-28 11:37

Scientific Quality: Grade B (Very good)
Language Quality: Grade A (Priority publishing)
Conclusion: Minor revision

Specific Comments To Authors:

This study proposes a topic of great interest in the palliative treatment of inoperable high-grade biliary stricture. The method applied in the research is correct: data source and primary and secondary endpoints are appropriate for research; the criteria of quality in the selection of the papers are valid and also the statistical analysis. I have an observation about the outcomes evaluated in the study: it's not clear the distinction between the primary endpoint as reintervention due to the stent failure and late adverse event with the stent malfunction as stent obstructionetc.

Answer:

The reintervention was defined under outcome section of the manuscript as "The re-intervention rate defined as re-intervention due to stent failure which was defined as any

endoscopic or percutaneous intervention necessary to improve biliary drainage, for recurrent jaundice, or for management of dilated intra-hepatic bile duct revealed by imaging, or management of immediate adverse event of successfully inserted SEMS”.

Although reintervention could be influenced by stent malfunction but not all the studies mentioned cause of stent malfunction clearly. We have added another table for cause of late stent malfunction (Table 2-Supplementary material) to explain the cause of late stent malfunction rates. The stent malfunction was in most cases included in stent re-intervention rates but not all studies clearly defined the reason for stent malfunction and hence we did not include the individual cause of stent malfunction in the main manuscript.

Reviewer 2:

Reviewer Name: Mitsuru Sugimoto

Review Date: 2019-03-26 13:11

Specific Comments To Authors: This meta-analysis is well written. It is true that retrospective studies were involved, however it can't be helped.

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (General priority)

Specific Comments To Authors (File): None

Response to Editors comments:

Please see the response to editors' comments. **All changes made are highlighted in the manuscript.**

Special comments from the editor:

CrossCheck:

According to the CrossCheck report, the similarity index between this manuscript and the published ones is too high, which doesn't meet the publishing requirements. Please revise the duplicated parts according to the CrossCheck report uploaded by the editor.

Reply:

CrossCheck: All the necessary changes have been made and the manuscript has been edited to remove any duplicated parts. Some Acronyms like SEMS (self-expanding metal stents), SIS (Stent-in-stent), SBS (Side-by-side) are standard acronyms and were not changed.

Audio core tip:

In order to attract readers to read your full-text article, we request that the author makes an audio file describing your final core tip, it is necessary for final acceptance. Please refer to Instruction to authors on our website or attached Format for detailed information. The accepted formats are mp3 or wma.

Reply:

Audio Core tip: Uploaded in correct format-mp3.

Figures:

Please provide the decomposable figure of all the figures, whose parts are all movable and editable, organize them into a PowerPoint file, and submit as "Manuscript No. - image files.ppt" on the system. Make sure that the layers in the PPT file are fully editable. For figures, use distinct colors with comparable visibility and consider colorblind individuals by avoiding the use of red and green for contrast.

Reply:

Figures: There were already uploaded during the last submission. Please let us know what more needs to be done. We have made all the parts of the figure editable during our last submission. Unfortunately, for figure 7 we had to use green and red as this is the standard coloring code for the Cochrane collaboration tool assessment.

Editing:

Your manuscript should be prepared with Word-processing Software, using 12 pt Book Antiqua font and 1.5 line spacing with ample margins.

Reply:

Word Editing: Manuscript has been edited per requirements.

Furthermore, two new sections- article highlight and a core-tip, were added as requested.

Thank you

Jagpal S Klair