

Rebuttal Letter

Title: Strategies for Achieving Successful Cannulation in ERCP: A Technical Overview

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Dear Editors and Reviewers of World Journal of Gastrointestinal Endoscopy,

We appreciate your kind review of our manuscript entitled “Strategies for Achieving Successful Cannulation in ERCP: A Technical Overview”. Suggested changes have been raised during the review of the manuscript. We have addressed these suggested changes and modified the manuscript in response to the editor and reviewer’s comments. A point-by-point response to the editor and reviewer’s comments is enclosed.

We hope that the revised manuscript is satisfactory for publication in the World Journal of Gastrointestinal Endoscopy.

Best Regards,

Ahmed Tawheed

Reviewer Comments	Authors Response
Reviewer 1	
<p>I had read this review with interest and have to say that although this is a useful review in terms of understanding the difficulties encountered during ERCP and the trouble shooting for such difficult cases I find that there is a little more than needed information and text in the review.</p>	<p>Thank you! We shortened the parts making the paper difficult to read.</p>
<p>The review has lot of information and too much of general detail. For example it is exhausting and tiring to read the full depth and breadth of the anatomy of the ampulla and the normal techniques before the reader gets to the actual topic which is the difficult ERCP , the most likley causes and how to navigate through such scenarois.</p>	<p>Thanks for drawing our attention to this fact. We have adjusted the manuscript to avoid such general details.</p>
<p>For example the authors had mentioned about the biliary system and did mention that "Bile, a digestive fluid produced by the liver, is initially collected by narrow canaliculi from each hepatocyte and then funneled into intralobular bile ducts, which drain individual liver lobules These intralobular ducts merge into interlobular ducts situated between lobules, eventually forming the right and left hepatic ducts that serve the liver's respective lobes; the caudate lobe is drained by ducts from both sides. Outside the liver, these ducts join to form the common hepatic duct, which, after meeting the cystic duct from the gallbladder, becomes the common bile duct (CBD)". I beleive that the readers are well aware of the anatomy part and that this would loose the reader from the main content of the review.</p>	<p>Thanks for drawing our attention to this fact. We have omitted this part.</p>
<p>There are a couple of areas in the discussion that could be avoided. Finally the advanced cannulation techniques are well described and I suggest the authors to please revise the manuscript in removing the redundant portions of the basic anatomy and highlight the important part of the review. That way the reader will not be tired and loose interest before they get to the actual content of the review.</p>	<p>Your comment establishes a good point of view. We have adjusted the discussion section to include only essential information.</p>

