November 11 2021

Lian-Sheng Ma, PhD, Professor
Editor-in-Chief
World Journal of Gastrointestinal Surgery

Re: 71947

Title: Peroral endoscopic longer versus shorter esophageal myotomy for achalasia treatment: a systematic review and meta-analysis

By Chun-Yan Weng, Cheng-Hai He, Ming-Yang Zhuang, Jing-Li Xu, Bin Lv

Dear Professor Lian-Sheng Ma:

Thank you very much for your correspondence dated September 27, 2021, regarding the review of our manuscript. We are pleased to hear that you are considering our manuscript for publication in the “World Journal of Gastrointestinal Surgery”, following some essential revisions. We appreciate very much the comments and suggestions from the editor and reviewers, and have made changes in the revised manuscript accordingly. The following are our point-by-point responses to the editor’s and reviewers’ comments.

Responses to Editor’s comments and suggestions:

First of all, thank you very much for your ongoing support of the World Journal of Gastroenterology and for contributing a manuscript to it.

We are very sorry to inform you that after rigorous peer review and evaluation by the editorial office, your manuscript does not reach the World Journal of Gastroenterology’s publishing standard with regards to the academic quality and, therefore, cannot be published in this journal.

A key criterion for accepting a manuscript is that the article must obtain a rating of AAA or AAB or ABB (A: Excellent; B: Very good) for academic content, by all of the three peer reviewers. If none of these ratings are attained, the manuscript will be rejected.

However, due to the interesting topical scope of your manuscript (Manuscript NO: 71947), we can offer acceptance for publication in the World Journal of Gastrointestinal Surgery, another journal of the Baishideng Publishing Group (BPG), provided the following requirement is met:
the manuscript must be revised according to the current reviewers’ comments that have been provided. If you are unwilling, your manuscript will be rejected. We recognize that you may be disappointed regarding the decision of rejection for the World Journal of Gastroenterology, but we encourage you to pursue the offer of publication in World Journal of Gastrointestinal Surgery.

Please make your decision whether you are interested in our offer to publish your manuscript in World Journal of Gastrointestinal Surgery within 3 days. Please login to the F6Publishing system at https://www.f6publishing.com by entering your registered E-mail and password. After clicking on the “Author Login” button, please click on the “Transfer to Another Journal” under the “Revisions” heading to find your manuscript. Clicking on the “Handle” button allows you to choose to either accept our offer to publish your manuscript in World Journal of Gastrointestinal Surgery or reject the offer.

The World Journal of Gastrointestinal Surgery is a high-quality, online, open-access, single-blind peer-reviewed journal published by the BPG.

Best regards,

Lian-Sheng Ma, Editorial Office Director, Company Editor-in-Chief, Editorial Office

Responses: We thank you and the reviewers for the positive assessment and constructive comments and suggestions. We have now revised the manuscript accordingly. The major changes in the text are marked in red. The entire manuscript has been proofread and met the journal’s guidelines.

**Responses to Reviewers’ comments and suggestions:**

**Responses to Reviewer #1**

Reviewer #1: General: Manuscript relevant to the scientific community. The meta-analysis compared the clinical effectiveness of longer and shorter myotomy.

Responses: we thank the reviewer for the positive assessment and constructive comments and suggestions, which have helped tremendously in the preparation of the revised manuscript. We have now revised the manuscript accordingly.

1. Proper language with little need for polishing.
Responses: Following the reviewer’s suggestions, we have now polished our manuscript language accordingly.

Responses to Reviewer #2

General: The article is within the scope of the journal. The subject is interesting. The presentation is well written and organized. Likewise, it is easy to read. On the other hand, the results presented are important in the area of article knowledge, and represent an advance. However, some improvements are needed.

Responses: we thank the reviewer for the positive assessment and comments and suggestions, which have helped in the preparation of the revised manuscript. We have now revised the manuscript accordingly.

1. In the first place, the introduction should be extended and the state of the question should be deepened.

Responses: We thank the reviewer’s constructive suggestions. We have now revised the manuscript accordingly. (Page 5, Lines 105-116).

2. The conclusions section should be extended and explain the scientific contribution of the work presented. Likewise, a set of future lines of work should be included.

Responses: Following the reviewer’s suggestions, we have now revised the manuscript accordingly. (Page 12, Lines 321-327).

Responses to Reviewer #3

Reviewer #2: General: The authors report the comparison of the peroral endoscopic myotomy between longer and shorter. The evaluation is beneficial to all clinicians, endoscopists and patients. The report has a very important aspect and is interesting, however, there are the following concerns.

Responses: We thank the reviewer for the positive assessment and constructive comments and suggestions, which have helped tremendously in the preparation of the revised manuscript. We have now revised the manuscript accordingly.
1. The authors compare the longer myotomy with shorter myotomy. However, the incision length is determined by identifying the responsible site causing the symptoms. Moreover, patients diagnosed with Chicago classification type III esophageal achalasia, diffuse esophageal spasm, and Jackhammer esophagus require a longer muscular incision than usual. Therefore, the significance the comparison the incision length is questionable.

Responses: We thank the reviewer’s constructive suggestions. As there are only a few researches on this issue, our paper cannot well reflect this conclusion. We have already described the shortcomings in the manuscript, but we will always pay attention to the development of this aspect. (Page 12, Lines 310-316).

2. The definition of Long Myotomy and Short Myotomy is unclear.

Responses: Following the reviewer’s suggestions, we have now corrected them in the revised manuscript accordingly. (Page 7, Lines 173-177).

3. Figure 2: the legend needs to be detailed for the unfamiliar readers.

Responses: Following the suggestions, we have now added the legend about figure 2. (Page 7, Lines 173-177).

4. A figure showing the significant difference in operation time is required.

Responses: Following the suggestions, we have now added the figure showing the significant difference in operation time.

Once again we appreciate very much the constructive comments and suggestions from the editor and reviewers. These comments have helped to improve the manuscript significantly. We hope the above responses and the changes made to the manuscript will meet your and the reviewers’ expectations. We are looking forward to publishing this manuscript in World Journal of Gastrointestinal Surgery.
Thank you again for your time and efforts devoted to the review and editing of our manuscript.

Sincerely,

Bin Lv, PhD
Professor