

Article information: <https://dx.doi.org/10.21037/tgh-23-94>

Reviewer A

This is a retrospective study assessing the safety and efficacy of managing patients with PFCs with LAMS followed by the placement of DPS after LAMS removal. The study is well designed, and the follow-up period is adequate.

Comment 1: It would significantly improve the clarity of the manuscript to add of a flow chart illustrating the selection process of the study cohort from the overall population of PFC patients, along with a separate branch indicating cases with LAMS but no subsequent DPS placement, and add to the flow chart the percentage of patients followed for a year and the number of patients with recurrence from the cohort, etc. Is it possible to compare the outcomes between patients who received DPS after LAMS removal and the cohort who did not have DPS placed. Exploring and contrasting these two groups could offer valuable insights into the necessity and impact of DPS in managing PFCs post-LAMS intervention.

Reply 1: Thank you for this comment. We have added a flow chart including all patients with PFCs, with and without DPS replacement. This manuscript focuses on patient outcomes with indwelling double pigtail stents looking at the rate of recurrence, locoregional complications, stent migration, development of diabetes, exocrine pancreatic insufficiency, and chronic pancreatitis.

Of the 34 patients who did not receive DPS, recurrence was seen in 12 patients, of which four were managed with repeat endoscopic therapy (n=2) and surgery (n=2). The remaining eight patients were asymptomatic and did not require any intervention. Given the lack of indwelling double pigtail stents in these patients and the majority of patients remaining asymptomatic, long term follow-up with repeat cross sectional imaging is not available for this group. Therefore, we have not included these patients in the analysis. We have modified the title of the manuscript, focusing on the clinical outcomes of patients with indwelling double pigtail stents as only this group was analyzed.

Also, below are few suggestions to improve the abstract language.

Comment 2: 1- It is important to make it clear that the DPS is placed after LAMS removal given that the DPS can be placed concurrently with the LAMS, please correct the below phrase accordingly.

"We analyze our 44 outcomes of long-term transmural drainage with DPS in patients with DPDS"

Reply 2: Thank you for this comment. We have clarified this in the text. No patient underwent concurrent LAMS and DPS drainage.

Changes in the text:

"This retrospective review of a prospectively maintained database from November 2015-July 2023 included all patients with DPDS who underwent removal of LAMS and replacement with long-term transmural DPS... Of these, 44 patients underwent successful LAMS removal followed by replacement with DPS and were included in the analysis."

Comment 3: 2- clarify in the below phrase that 44 patients are your study cohort that you analyzed subsequently.

"Of these, 44 patients underwent 44 successful LAMS replacement with DPS. The median age was 57 years and 14 (32%) 45 were female."

Reply 3: Thank you for this comment. We have clarified this in the text.

Changes in the text: "Of these, 44 patients underwent successful LAMS removal followed by replacement with DPS and were included in the analysis."

Comment 4: 3- "Twenty-eight patients had a follow-up duration over a year. Three patients developed new-onset diabetes. Chronic pancreatitis changes in the disconnected segment were seen in eight patients, five of whom required pancreatic enzyme supplementation" I suggest adding "among those patients who were followed for a year, three patients

Reply 4: Thank you for this comment. We have added your suggestion to the text.

Changes in the text:

"Among the 28 patients who were followed for a year, three patients developed new-onset diabetes, and chronic pancreatitis changes in the disconnected segment were seen in eight patients, five of whom required pancreatic enzyme supplementation."

Reviewer B

1. Please provide the name of the IRB which approved this study and add a statement regarding informed consent in the Methods section.

Response: IRB00035936 - Retrospective Analysis of Acute Pancreatitis at an Academic Medical Center

Statement regarding informed consent has been added to the Methods section under Procedure Details

2. City and Country are required for the affiliations.

Response: They have been added to the title page

3. "Division of Gastroenterology" in the corresponding information is presented as "Section on Gastroenterology". Please confirm which one is correct.

Response: Section on Gastroenterology is correct. This has been corrected in the title page

4. Please provide 'Author contributions' section in the following format: (I) Conception and design: (II) Administrative support: (III) Provision of study materials or patients: (IV) Collection and assembly of data: (V) Data analysis and interpretation: (VI) Manuscript writing: All authors; (VII) Final approval of manuscript: All authors;

Note: VI and VII of all authors are obligatory while the rest of the information is case-based. You may record "N/A" if not applicable.

Response: The above information has been added to the title page in the desired format

5. All the abbreviations in the figure(s) and table(s) should be defined in the explanatory legend.

Response: Requested changes have been made

6. Figure 2

*Replace **asterix** with **asterisk**.

*An overall summary legend is required.

Response: Changes made; table and figure legends attached

7. Table 1: Each column requires a header.

Response: Changes to Table 1 have been made as requested