



**Baishideng
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Dear Editor,

Firstly, we would like to thank you and the reviewers for the kind feedback and insightful comments. We agree entirely with the points raised by the reviewers, and we thank you for helping us make sure the strongest version of this manuscript has emerged. Please find below point by point responses to the reviewers and we are happy to make any further changes that you should feel appropriate.

Company editor-in-chief: I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before final acceptance, the author(s) must add a table/figure to the manuscript.

Response: Many thanks for your kind words. We have added a figure to the manuscript depicting "Digital Surgery" in action. Some of the reviewers noted that the concept was not introduced in enough detail, and we feel this case example should help in this regard. (We have also expanded on "Digital Surgery" further in writing which shall be detailed in a separate response to reviewer.) Many thanks.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 67748

Title: Digital Surgery for Gastroenterological Diseases

Reviewer's code: 05742117

Position: Editorial Board

Academic degree: PhD

Professional title: Associate Professor

Reviewer's Country/Territory: India

Author's Country/Territory: Ireland

Manuscript submission date: 2021-04-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-08 08:41

Reviewer performed review: 2021-05-17 06:57

Review time: 8 Days and 22 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Article is well structured and written very well. • A more comprehensive review of the AI based endoscopic systems developed globally need to be reviewed • Being editorial article, some critical analysis of performance of the AI / Digital methods being explored in digital surgery and their future trends to be discussed • Typos :
Typographical errors in some parts of article.

Response to Reviewer 1: Our sincere thanks to this reviewer for their kind words on our manuscript. While we did address some recent milestones in AI for endoscopic evaluation this was with the purpose of highlighting the level of advancement in this area and contrasting it to AI in surgery which is still very much in its infancy. The area of AI in endoscopic systems has been well reviewed elsewhere and these are now referenced in the manuscript (references 4-6) however should the journal feel that a table summary of AI milestones in endoscopic systems would make this manuscript stronger we are happy to add one. Additions to the digital methods being explored in surgery have been added including the use of Deep Learning models in laparoscopic cholecystectomies and in peroral endoscopic myotomy. A thorough review of the paper for typographical errors has been performed.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 67748

Title: Digital Surgery for Gastroenterological Diseases

Reviewer's code: 05758135

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Ireland

Manuscript submission date: 2021-04-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-10 02:08

Reviewer performed review: 2021-05-18 09:00

Review time: 8 Days and 6 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

This is a manuscript describing the prospects for digitalization, with focusing on the use of AI, in gastrointestinal diseases. This manuscript describes the current status of AI use in this field, including a comparison with other fields. Apart from this, it also mentions a guide system for gastrointestinal surgery, and a system that combines this with AI. In addition, the future prospects and possible problems (mainly ethical ones) are also described. No any major problems were seen in the content. If possible, I would like to see a mention of the benefits of AI being "locked". Also, a definition of the term "Digital Surgery" would be helpful to make the point clearer. As minor points for correction. In the fourth and fifth lines of page 3, "Digital" might be "Digital Age". Since Reference 4 is a webpage, it is necessary to provide a specific URL and date referred. Because there is a possibility that the contents may revised when a reader refer from the time the authors referred.

Response to reviewer 2: Once again many thanks to the reviewer for their kind words and we are glad you enjoyed our manuscript. We have further expanded on the area of "locked AI" in the manuscript as requested and we agree with the reviewer that this is an interesting and thought-provoking topic in AI.

We also agree that "Digital Surgery" was not appropriately defined in the original manuscript and have added a definition to the introduction. "Digital Age" has been corrected. A URL and date of access has been added to the reference as correctly

requested: **"US Food and Drug Association (FDA). Artificial Intelligence/Machine Learning (AI/ML)-Based Software as a Medical Device (SaMD) Action Plan** www.fda.gov. 2021.

<https://www.fda.gov/files/medical%20devices/published/US-FDA-Artificial-Intelligence-and-Machine-Learning-Discussion-Paper.pdf> (Accessed 25.06.21) »

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 67748

Title: Digital Surgery for Gastroenterological Diseases

Reviewer's code: 05407209

Position: Editorial Board

Academic degree: PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Ireland

Manuscript submission date: 2021-04-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-14 00:38

Reviewer performed review: 2021-05-21 01:04

Review time: 7 Days

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input checked="" type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input checked="" type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

1.The author seldom introduces digital surgery, and many development technologies and means are not mentioned. It is suggested to introduce digital surgery in detail. 2.The development process of AI decision-heavily-guarded in Gastroenterology is less. 3.In AI Pitfalls and Concerns , a paper can not generalize all, there are certain limitations.

Response to reviewer 3: Many thanks to this reviewer for their time and effort in reviewing our manuscript. We agree that digital surgery was not adequately introduced and have added a clarifying definition to the introduction as well as an illustrative figure and some further discussion around modern digital surgery technologies. We have also added further discussion on the benefits and pitfalls of AI especially surround locked and unlocked AI.

Once again, thank you for your time and constructive criticism. We are very proud to re-submit our manuscript taking in to account the above suggestions. We await the result of your considered reply and are happy to make any other changes should you feel appropriate.

Yours Sincerely,

Niall Hardy