

Answering Reviewer

Scientific Quality: Grade D (Fair)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: Reviewer #1: The article is a comprehensive overview of GEP-NET, including pathology, diagnosis and treatment, and also emphasizes the importance of MDT in management of GEP-NET. However, some parts of the article need improvement, the latest progression and update of GEP-NET did not show in the article. For example Morphologic Imaging did not show any update of GEP-NET. The treatment of pancreatic-NET is too simple, the targeted therapy and chemotherapy are not mentioned, The authors need to rebuild what to write and what not to write. Otherwise, the full text is too long, but it is not in-depth, and it cannot comprehensively describe the latest progress of GEP-NET. . Minor 1 abstract, the “our review sets out ... gastrointestinal tract”, but the title is Gastroenteropancreatic Neuroendocrine Neoplasms 2 the last paragraph in introduction is redundant with 2th paragraph, all about Epidemiology and Incidence

Thank you for your thorough and thoughtful review. Based on your recommendations we expanded our discussion on treatment of pancreatic NETs and included a table and treatment algorithm. We also condensed other sections while updating them (including morphologic imaging) with new citations to further describe the latest updates.

We also changed the wording in the abstract to make it clear that we are reviewing GEP-NET. We removed the last paragraph in the introduction to avoid redundancy.

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Conclusion: Minor revision

Specific Comments to Authors: Reviewer #2: 1. Classification of ENET can be assigned a separate heading 2. Information presented can be condensed into short tables under specific subheadings (eg: G1-4 under gastric can be tabulated to better understand and appreciate the variations) 3. Algorithms (based on size/site, interventions can be outlined) / flow of investigations would capture the review in a better prospective 4. A note on differential diagnosis can be included

1. We adjusted the ENET heading as suggested
2. Based on your very helpful recommendations, we added multiple tables (including one about the different types of gastric NETs) to highlight information from each section.
3. We appreciate your recommendation for an algorithm, and as such we created figure 9 regarding management of pancreatic NETs.
4. We included mention of differential diagnosis where appropriate.