Answering Reviewers

Dear Reviewer #1

Thank you for your review and evaluation of our manuscript and your valuable comments. We are sorry that there are some mistakes in the writing of the patient inclusion and exclusion criteria and we have revised the inclusion and row criteria. We have also edited the places you mentioned that need language polish. First, I want to explain our inclusion and row criteria. All the patients we have left are patients with complete information (including survival and recurrence information). In the whole data collation, some patients were explained and excluded in the flow chart due to lack of clinicopathological information or loss of follow-up. This results in our data appearing to be missing some patients. However, the number of patients who were finally included in the study was 309, and the subsequent analysis and conclusions were also based on these patients with complete information.

Thank you for correcting our introduction. The reference of placing drugs was added into our manuscript. We have been revised the sentence. It is believed that the recurrence of gastric cancer patients usually occurs in the first year after surgery and we added the reference.

Thank you for pointing out the irregularities in the writing of our methods section. We include the TNM stage II and stage III gastric cancer patients and we excluded the cancer of gastric remnant which means that cancer after previous gastrectomy. These conditions where 5 FU was unsuitable:

1.Those who are allergic to chemotherapy drugs and excipients.

2.The patient's vital organs, such as the heart, liver, kidney, etc., have more serious dysfunction or serious cardiovascular disease. If chemotherapy is used, it will cause further damage.

3.The patient's bone marrow hematopoietic function is suppressed, manifested as leukopenia, such as leukocytes $<3.5 \times 10^9$/L or platelets $<50 \times 10^9$/L or those with bleeding tendency.

4.Elderly, frail, poor nutritional status, cachexia or survival <2 months.

5.Patients with bone marrow metastasis or radiotherapy who have extensively irradiated bone marrow.

6.Anemia and low plasma protein.

7.The number of previous radiotherapy and chemotherapy is small, and the patient's body has a large toxic reaction.

8.The body has serious infectious diseases such as chickenpox and herpes zoster.

9.History of embolic disease. Such as cerebral embolism, pulmonary embolism, myocardial infarction, etc.

10.Patients with severe active ulcers (gastrointestinal tract, skin, etc.) and high fever.

Your revisions to our Discussion section have contributed to our better literature.

Thank you for pointing out some mistakes of our discussion. 5-FU implants were widely used in China and some academic achievements were published in Chinese. We supplemented the consensus of Chinese experts and revised the statement in the discussion section.

Sincerely thank you for reviewing our article, thank you for your comments to improve the quality of our article.

Dear Reviewer #2

Thank you for your review and evaluation of our manuscript and your valuable comments. There are many factors that affect the short-time and long-time prognosis of gastric cancer patients. The gastric cancer patients prognostic model which constructed by the combination of multiple

indicators is also the research hotspot. Your proposal to us is our next research direction and we are collecting and refining data. Thank you for your affirmation of our article.

Dear Reviewer #3:

Thank you for your review and comments on our manuscript. In order to better reflect the therapeutic effect of 5-FU, we deleted patients with incomplete clinicopathological information and patients who were lost to follow-up. This is the bia and problem that we cannot avoid. Thank you for your pointing out.

Thanks for your advice. We modified the Figure I.

Intraoperative sustained release 5-FU implants treatment is widely used for gastric cancer treatment in Chinese. The use of 5-FU implants was first presented at the 1st China Cancer Targeted Therapy Technology Conference in 2003. In 2007, Wei and Zhao et al conducted clinical trials in different medical centers, proving the safety of the drug. These academic achievements had been published in Chinese journals. Different medical centers have published results on drug safety in the following years. In 2012, Chinese scholars wrote an expert consensus on intraoperative regional sustained-release chemotherapy for advanced gastric cancer. It is recommended to use 5-FU implants in patients with T2, T3, especially T4 tumors and those with lymph node metastasis and patients with cancerous ascites or peritoneal washings with positive cytology. Our research is approved by the Ethics Committee and the manuscript is submitted with an approval report. Although most of the research was published in Chinese, two articles in our citations were still published in English.

(1) Ge J, Liu T, Lei T, Li X, Song K, Azizi S, Liu H, Tang M. Retrospective Cohort Study of Intraoperative Administration of Sustained-Release 5-Fluorouracil Implants in Advanced Gastric Cancer Patients. Front Pharmacol. 2021 Apr 13;12:659258. doi: 10.3389/fphar.2021.659258. PMID: 33927633; PMCID: PMC8076801.

(2) Xu Y, Zhang R, Li C, Sun Z, Deng J, Wang X, Ding X, Wang B, Xue Q, Ke B, Zhan H, Liu N, Liu Y, Wang X, Liang H, Xue Y, Xu H. Intraperitoneal Chemotherapy Using Fluorouracil Implants Combined With Radical Resection and Postoperative Adjuvant Chemotherapy for Stage III Gastric Cancer: A Multi-Center, Randomized, Open-Label, Controlled Clinical Study. Front Oncol. 2021 Jul 8;11:670651. doi: 10.3389/fonc.2021.670651. PMID: 34307140; PMCID: PMC8298064.

We believe that our research conforms to the corresponding ethical standards, and proposes the method of Chinese scholars for the treatment of gastric cancer, a tumor with high incidence in East Asia.

Thank you again for reviewing and commenting on our manuscript!

Dear Reviewer #4:

Thank you for your high affirmation of our article. We believe that the presentation of the results of this paper will play a certain role in the treatment of gastric cancer.