

Answering reviewers

Dear Editor,

Thank you for your useful comments and suggestions on the structure and language of our manuscript. We have modified the manuscript accordingly, and detailed corrections are listed below point by point:

- 1) Comments To Authors: Interesting comparison of 2 techniques of postgastrectomy reconstruction, I would recommend to group complications according Clavien Dindo classification. Major English proof by native speaker is needed.

Classification: Grade C (Good)

Language Evaluation: Grade C: a great deal of language polishing

Conclusion: Major revision .

Firstly, for the recommendation about complications classification, we have adopted it and added it to sections of result and discussion. The Clavien-Dindo classification of surgical complications is good at evaluating the severity of postoperative complications, which is a necessary complement to the evaluation about the quantity of them, so it really makes senses for the comparison of safety between the two reconstructions .

Secondly, for the language evaluation, we have invited native speaker to revise the whole manuscript again and tried to avoid any grammar or syntax error. We believe that the language is now acceptable for the

review process.

2) Comments To Authors: In RCT, random assignment is important and performing it is easy if researchers know how to do it. Besides the practice of randomization, correct reporting of the randomization process is also important and it should be done very accurately. Authors should deepen this passage in the Methods section. A piece of information on the survival of these patients is mandatory.

Classification: Grade C (Good)

Language Evaluation: Grade B: minor language polishing

Conclusion: Minor revision

Firstly, the Division of Clinical Research of our hospital is in charge of the whole randomization process, and this section has been deepened again.

Secondly, though the objective of this study is mainly to evaluate quality of life of patients receiving different reconstruction after distal gastrectomy, for cancer treatment, the survival rate is a prerequisite. So we have added the survival rate of 1 year to the result.

For the language evaluation, the answer has been showed previously.

The manuscript has been resubmitted to your journal. We look forward to your positive response.