Dear Editors and Reviewers:

Thank you for your letter and for the reviewers' comments concerning our manuscript entitled "A retrospective study of associate factors for ESD operation time and postoperative delayed hemorrhage of early gastric cancer". Those comments are all valuable and very helpful for revising and improving our paper, as well as the important guiding significance to our researches. We have studied comments carefully and have made correction which we hope meet with approval. Revised portion are marked in red in the paper. The main corrections in the paper and the responds to the reviewers' comments are as following:

## Reviewers' comments:

## Reviewer 1

This is an interesting study of the influencing factors associated with ESD operation time and postoperative delayed hemorrhage, and provide the knowledge for early planning, early identification, and complications prevention. This study is well designed, and performed. The manuscript is well written. The sample size is enough, total 520 patients with early gastric cancer treated with EGC were included in this study. Inclusion and exclusion criteria are clearly described. The ESD operation process and postoperative treatment are properly listed in detail. Minor comments:

1. There are some minor language polishing, which should be corrected.

Response: Thanks for your suggestion. The language has been checked and revised by an English expert.

2. The equation in the results section (In = 21.674 + 8.815X1 + 3.766X2 + 10.247X3 + 4.417X4 + 3.692X5 + 2.536X6.) should be checked, "X" should be "×"?

Response: We have changed X to  $\times$  in the results section.

3. The reference numbers in the text should be revised according to the

journal's guideline.

Response: Thanks for your suggestion. We have revised the reference

numbers according to the journal's guideline.

4. References list should be edited and updated.

Response: Thanks for your suggestion. We have updated several

references, and add the PMID number and DOI.

Reviewer 2

ESD has been used as the first line treatment for early gastric cancer with the

advantages of small invasion, fewer complications, low resection rate and

local recurrence rate. However, ESD requires advanced endoscopic

equipment and skilled operation practices. The risk of complications of ESD is

high, and the operation time is also long. In this study, the authors explored

the influencing factors of ESD operation time and postoperative delayed

hemorrhage. Overall, the topic of this study is attractive, and the results are

interesting. The reviewer recommends to accept this study for publication

after a minor editing. I have no specific comments to the authors.

Response: Thanks for your positive comments.

Reviewer 3

I have no comments to the authors. My recommendation is acceptance.

Response: Thanks for your positive comments.

**Editorial Office:** 

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 Gastrointestinal Surgery,

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. 请补充内镜下治疗 ESD 照片。Please authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript.

Response: Thanks for your suggestion.

- 1. We have added the process pictures of endoscopic submucosal dissection for early gastric cancer.
- 2. We have checked the tables format.
- 3 We have added the section of "ARTICLE HIGHLIGHTS".