

Dear reviewers,

Thank you very much for your comments and professional advice. These opinions help to improve academic rigor of our article. Based on your suggestion and request, we have made correct modifications on the revised manuscript. We hope that our work can be improved again. Furthermore, we would like to show the details as follows:

Reviewer #1:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: Dear Editor, Dear Author, I read with great interest the manuscript entitled "Endoscopic treatment of extreme esophageal stenosis complicated with esophagotracheal fistula: An innovative case" by Jia-Heng Fang et al. This was a case report describing a case of severe esophageal stenosis complicated with trachea-esophageal fistula, successfully treated by means of a minimally-invasive endoscopic approach, including EIM, metallic stenting, and balloon dilation. I consider the manuscript well written and relevant for the research context.

-Thank you very much.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: Thank you very much for the opportunity to review this interesting case report. This case report is about a patient with severe ES and ETF that was successfully treated with esophageal stent and anti-TB agent. Following is my comment;

1. The timing of corrosive ingestion, emergency treatment at that time, symptom of dysphagia, lung infection, investigation such as UGI study and the time of esophageal stent insertion/dilatation were not clearly demonstrated.

- Thank you for your advice, we have added the UGI, and elaborated the time of esophageal stent insertion/dilatation.

2. I suggested the authors to write the timeline to present this case. Nutritional status and body weight in each visit and total follow-up time until now are also needed in the timeline.  
  
- Thank you for your suggestion, we wrote a timeline to indicate all the treatment events.
3. It is less likely that the large fistula would be closed by esophageal stent. Does patient have repeated UGI study after stent removal? It will be good to provide the picture as this is the strong evidence the fistula has been closed already.  
  
-We have add the repeated UGI study after stent removal.
4. This case also has pulmonary TB so that the discussion about TB with ETF should be mentioned in the discussion part as it might be involved and it will be good to look for in the difficult case like this.  
  
- Thank you for your suggestion, we discussed the TB and ETF in the discussion.
5. The picture of CT scan with esophageal stenosis is not necessary as you also had endoscopic/UGI picture that was well demonstrated the stricture.  
  
- Thank you for your suggestion, we have deleted the CT scan.

Thank you very much for your attention and time. Look forward to hearing from you.

Yours sincerely,

Jia-heng Fang