

Replies to the comments of the reviewers

on the manuscript

Endoscopic resection for calcifying fibrous tumors of the gastrointestinal tract

GENERAL REPLIES

We thank all editors and reviewers for giving us an opportunity to develop this manuscript again. We have carefully revised the manuscript as suggested (modified parts are in red throughout the paper). We address all comments in detail in the point-by-point response below.

REPLIES TO THE COMMENTS OF REVIEWER 1

Reviewer's comment:

1. Interesting study on a very specialized topic. The manuscript is well organized with a comprehensive description of the procedures performed. In this regard, it is important to underline the rich iconography. The tables appear useless. Information that is partly already included in the text is reported in the table (especially in Table 2). I ask the authors to better specify the follow up period and to list whether only clinical or also instrumental follow up.

Authors' response:

We really appreciate your acceptance. We have changed the Table 2 to Supplementary Table 1. Patients underwent regular follow-up for the evaluation of wound healing, local recurrence, and distant metastases through endoscopy or telephone interviews at 3 and 6 months after resection. For patients residing outside our locality, we recommended undergoing follow-up examinations at their local healthcare facility, coupled with telephonic follow-up consultations for convenience. Detailed telephone interviews were conducted by trained physicians for patients who were unwilling to return for follow-up. The interviews included questions regarding examinations and treatments at other hospitals. The last follow-up was conducted in March 2022. For patients who experienced relapses, endoscopy and EUS were performed to check for recurrent tumors, and abdominal EUS and CT were conducted to examine distant metastasis. (Page 8, Lines 186-192)