

Dear Editor and Reviewers,

Thank you very much for your attention and valuable comments on our manuscript. We have carefully read through the reviewer's comments and thoroughly analyzed and discussed each one of them. Here, we provide our responses and explanations to address the reviewer's concerns.

Reviewer's Comment 1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors:

The authors presented a thorough review of the current knowledge on G-POEM which is an emerging area in the field of GI endoscopy. This manuscript summarizes important data that is useful for advanced endoscopists as well as for the basic GI practitioners who are entering the field. This technique is reserved for advanced endoscopist only, and not every Center has applied G-POEM yet, which is the reason for the high interest in this technique. The text is well organized in chapters which makes the article concise. Minor change that should be corrected – in the section 2.2.

Submucosal tunneling (page 5), the reference by Stojilkovic et al. was used, but the surname was misspelled.

Company editor-in-chief:

I recommend the manuscript to be published in the World Journal of Gastrointestinal Surgery. Before final acceptance, the author(s) must add a

table/figure (medical imaging) to the manuscript. When revising the manuscript, it is recommended that the author supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript.

For each reviewer's and editor's comment, we have provided thorough responses and explanations. We believe that these responses adequately address the reviewer's concerns and further support our research perspective.

1. We have corrected the spelling errors of the surnames in the article as per your suggestion.
2. We have re-submitted the manuscript to the recommended language editing company as per your suggestion, made corrections to the language issues, and ensured that the language level has reached Grade A.
3. We have created an image and two tables. The image is related to the diagnosis of gastroparesis, which we believe can help readers better understand the diagnosis of gastroparesis in a more convenient way. The tables include the recent innovations of G-POME technology and the traditional drug treatment plans for gastroparesis. We believe that this can help readers better

understand the innovations of G-POME technology and the problems with traditional drug treatment plans for gastroparesis.

4. Although G-POME is a technology that emerged in 2013, there have been few highlights in recent years about the use of G-POME for treating gastroparesis. The cutting-edge research results that caught our eye were the use of G-POME to treat congenital hypertrophic pyloric stenosis (CHPS) and the application of the new technology called EndoFLIP®. Our article summarized and evaluated these two innovative application schemes and provided several suggestions for the future development direction of G-POME.

Once again, thank you for your attention and valuable comments on our manuscript. If you have any further questions or require additional clarification, please do not hesitate to contact us. We look forward to your response.

Sincerely yours,

Tong-Yu Tang