

Editor in Chief,
Editorial Office,
Reviewers
of World Journal of Gastroenterology

Dear Editor:

Thank you for considering our manuscript entitled “**Minimally invasive surgery for gastric cancer: a comparison between Robotic, Laparoscopic and open surgery**”.

We are very pleased that the article aroused your interest and that you offered positive comments and suggestions.

Particularly, we thank all the members of the Editorial Office and the reviewers for their invaluable work and for their interest in our research. Reviewers’ comments provided extremely useful suggestions, and we considered all the required changes in the new version of the manuscript, thus significantly improving it.

Thanks again for your work and the time spent on the manuscript revision. We look forward to hearing from you in the near future.

Warm regards,

Jacopo Desiderio

The corresponding author

Response to the Reviewers:

We thank the reviewer for their valuable suggestions.

Overall, reviewers have made similar comments.

The highlighted issue regards the homogeneity of groups. To enhance the quality of the study we decided to do a propensity score analysis, as suggested by reviewer no. 00579619. So, we turned to a matched case-control study.

Even if this required a big effort to redo the analysis, as you can imagine, we think that this point has highly improved the scientific quality of our paper.

Patients in the RG, LG and OG group were 1 : 1 : 2 matched by the closest propensity score on the logit scale. Moreover, the high number of patients in our database permitted to use a Caliber = 0.2.

Each patient's propensity score was calculated by a multivariable logistic regression model using the covariates of age, sex, comorbidities, body mass index (BMI), type of gastrectomy, stage of disease.

Particularly, now the three groups have similar distribution of baseline patient characteristics: age ($P=0.14$), gender ($P=0.26$), BMI ($P=0.31$), ASA ($P=0.18$), comorbidities ($P=0.96$). Also, as required by reviewers 03251521, 00253974, 00068348, the groups showed no significant differences in the distribution of cases regarding type of gastrectomy ($P=0.42$) reconstruction performed ($P=0.1$), lymphadenectomy ($P=0.32$), tumor location (0.57), stage of the disease ($P=0.16$).

Also, we agreed with reviewers 00253974, 00068348 who recommended to better specify the limitations of this study.

Finally, all the comments from the Editorial Office were followed to edit the paper.