

Authors have read the peer-review report and revised the manuscript carefully according to the reviewers' comments and editor's suggestions. We improved the quality of the manuscript and looked forward to making manuscript suitable for publication *World Journal of Clinical Cases*.

1. Answers to the first reviewer's comments (**Reviewer's code:** 00735356)

Q1: I have read the narrative review. It appears informative and would be useful for readers. I shall suggest to add table for published literature for beneficial effect of the molecule. All published data with the outcome may be tabulated.

A1: Dear reviewer, thanks for your support and good suggestion. tables summarizing the results of clinical trials have been added to the manuscript. Table1 summed up related studies which compared NAE alone or combination therapy with NAC and we considered that NAE and NCET can act as potential approaches in the neoadjuvant settings. Table2 and table3 discussed the optimal duration endocrine agents, targeted agents in the NAE settings.

2. Answers to the second reviewer's comments (**Reviewer's code:** 00646291)

Q1: Authors should consider including a table summarizing the results of the clinical trials presented in the review.

A1: Thank you for the comments, we have added three tables(table1,2,3) to summarize the published data of literatures.

Q2: Authors should comment on the similarities and differences between the different genomic studies presented in the review for the expression of genes that appear to common in these studies.

A1: It is a very good suggestion; we have elaborated the similarities and differences of various genomic assays in discussion part. These assays including Oncotype Dx, Endopredict and MammaPrint showed similar effects based on risk stratification that low-risk ER+ patients could benefit from neoadjuvant endocrine therapy and avoid adjuvant chemotherapy. However, according to specific related genes and statistical algorithms, different assays

provided inconsistent categories of individuals, such as MammaPrint assay divided patients into low-risk and high-risk groups and Oncotype Dx had an additional moderate-risk group.

Q3: Minor comments "...predictive tools that can screen valuable individuals..." replace the word valuable rephrasing the sentence to express more accurately the meaning of the sentence.

A3: Thank you for this tip, we used the word suitable to replace the word valuable to express more exactly.

Q4: "...excisionm..." "As illustrated, neoadjuvant AIs are superiority over tamoxifen." Replace the word superiority with the phrase show better outcomes.

A4: Thank you for point out our spelling mistake "excisionm", we have corrected it into "excision". The sentence "As illustrated, neoadjuvant AIs treatment possessed better efficacy than tamoxifen. "was provided to express the meaning of "better outcome ".

Q5: The sentence "Further studies should be conducted to verify whether EP and EPclin can as surrogate parameters of prognosis after NAE in larger range of population" needs to be rephrased.

A5: Based on your meaningful comments, previous sentence was rephrased as "Further studies should be conducted to verify whether EP and EPclin scores can act as alternative parameters of prognosis in NAE settings in wide range of population."

Q6: The sentence "...did not reverse the evaluation value..." needs to be rephrased.

A6: We used "...the results remained the same..." to express our content more clearly.