

## Point-to-point response

Reviewer #1(00058401)

**Comments:** Congratulations for the quality of yours work

**Reply:** Thanks for your congratulations.

Reviewer #2(00068723)

**Comments:** The authors reviewed artificial intelligence (AI) in colorectal cancer (CRC). The topic was relevant and attracting. The authors concluded that AI was promising and would be more practical in the future. The conclusion was agreeable. Clinical target volume and irradiation treatment was a new aspect of AI. As the authors stated that there were several programs of AI for CRC. Introduction of AI programs would be helpful and informative. For example, how the images with colonoscopy were processed, and the results.

**Reply:** Thanks for your comments. We have added some introduction of AI programs used for images processing into the manuscript. See “Page 6, paragraph 2, line 12.” and “Page 8, paragraph 3, line 9.”

Reviewer #3(00053888)

**Comments:** The authors have reviewed the role of artificial intelligence in the diagnosis and management of colorectal cancer. This is a useful and important review and it would appear that the role is more advanced in diagnostics. I think that the authors would be better in sticking to colonoscopy and histological biopsy rather than trying to cover all fields. This would give them a more specific readership. I also think that the manuscript could probably do with a few more figures to break up the text.

**Reply:** Thanks for your comments. We have removed some contents such as AI in cancer driver gene prediction. We strongly recommend to keep the introduction of AI application in imaging. Clinical target volume and irradiation treatment was a new aspect of AI application. These contents may attract many radiologists. As your suggestion, we have added two more

figures to break up the text. See “Figure 2, 3”.

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**Comments:** The authors have not really listened. Is the manuscript about colonoscopy and polyp detection using AI? Or is the manuscript about TME, MRI & CT using AI? or is the manuscript about AI in planning adjuvant/neoadjuvant treatment of colorectal cancer. Currently it is a confused manuscript and the bulk appears about colonoscopy and histopathological detection of polyps using AI and then at the end the manuscript jumps to MRI, surgery and planning neoadjuvant treatment. The authors would be best placed to concentrate on colonoscopy & polyp detection for this journal. I think the manuscript in it's current form is less suitable for this journal.

**Reply:** Thanks for your review. The **accepted title** of this invited manuscript (05038685) is *"Potential applications of artificial intelligence in colorectal polyps and cancer: Recent advances and prospects."* Therefore, our manuscript is about the application of AI in **colorectal polyps** and **colorectal cancer**. As we mentioned in the manuscript, colorectal polyps and colorectal cancer are the two most common diseases of large intestine, and some adenomatous polyps can be transformed into cancer. Therefore, we can attract more readers by summarizing the application of AI in these two diseases together. We think that's why the title of this invited manuscript is accepted by this journal. In the first part of this manuscript, we talked about the application of AI in the detection and classification of colorectal polyps. In the second part, we talked about the application of AI in the diagnosis (including qualitative diagnosis using colonoscopy, and staging diagnosis using CT or MRI) and adjuvant therapy of colorectal cancer. We agree with your opinion that the manuscript covers too much content. Therefore, in order to retain the original structure of the article and refine the theme, we delete the content about application of AI in the adjuvant therapy of colorectal cancer. Currently, this revised manuscript focuses on the application of AI in the diagnosis of colorectal polyps and colorectal cancer.