

Dear Editor and Reviewers:

On behalf of my co-authors, we thank you very much for giving us an opportunity to revise our manuscript (NO: 70560). We appreciate editor and reviewers very much for their positive and constructive comments on our manuscript. To address the critiques of the reviewers, we revised our manuscript according to their comments. Attached please find the revised version, which we would like to submit for your kind consideration. We would like to express our great appreciation to you and reviewers for comments on our manuscript.

Looking forward to hearing from you. Thank you and best regards.

Yours sincerely

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Reply to Reviewer 1:

Thank you for taking the time to review and validate our manuscript. Thank you very much for your recognition of our study. We have carefully revised according to your opinion, and now the replies are as follows:

1. There are so many numbers in Results. The authors may want to put those numbers in Tables.

Response: Thank you for your valuable suggestion. Your suggestion is crucial to improving the quality of our study. As you said, there is a part of the

results that are better placed in tables rather than text. We have put a part of the results in Tables as supplementary materials.

2. Similarly, there are so many comparisons with p values. The authors may want correction for multi-analyses.

Response: Thank you for your friendly reminder. Ensuring the correctness of statistics is very important to the quality of articles. The p value of logistic multivariate analysis in our manuscript has been corrected by SPSS software. We would like to determine whether this is in response to your comments. If you have any suggestions or comments, please don't hesitate to inform us.

3. Did the authors analyze response to chemotherapy after recurrence based on the study results?

Response: Thank you for your suggestion. Your suggestion can add highlights to our article. Regrettably, a part of patients with postoperative recurrence did not receive chemotherapy in our institution, but returned to the local hospital for chemotherapy. To ensure the accuracy of the study, we only included patients who received complete postoperative chemotherapy in our institution. We did not include patients who did not undergo treatment in our institution, or who returned to the local hospital after surgery without complete chemotherapy records. This is the reason why we did not analyze the response to chemotherapy after recurrence according to the research results. In the future, we hope to analyze the chemotherapy response after recurrence by supplementing our data and follow-up. Your suggestion is the direction of our future research.

We have carefully revised according to your suggestions, thank you again for your review.