

Dear Editor and dear reviewers

Re: Manuscript ID:72606 and Title: The self-made wire loop snare successfully treats gastric persimmon stone under endoscope

Those comments are valuable and very helpful. We have read through comments carefully and have made corrections. We would love to thank you for allowing us to resubmit a revised copy of the manuscript and we highly appreciate your time and consideration. The point to point responds to the reviewer's comments are listed as following

Sincerely.

Qiang Tong.

Reviewer #1:

Q1. Although the new snare technique appears very beneficial, the authors acknowledge in the discussion that the two cohorts were in different time periods. It is noted that technique included the use of coca cola infusions, it would be good to note whether this was done in equal percentages of cases in both the controls and observational cohort and the method of infusion also seems to have evolved so was this consistent through both time periods.

Response: All patients in the study took Coca-Cola orally before operate. In page 4, part Treatment method, we described it in detail. And all patients were instructed to continue taking Coca-Cola orally with the same method as above after treatment.

Q2. Since this is a retrospective sample of convenience, in the methods it would be helpful to do a post-hoc power calculations for the power of the study to detect the size of differences in response rates in the primary outcome.

Response: Thank you for your suggestion, as suggested by reviewer, we compare phytobezoars longest diameter between two groups in Table 1.

Q3. As this study was different in time periods, the experience level of the endoscopists in performing the foreign body removal should be noted. Were all experienced during the control period already? Is this partially the effect of the endoscopists becoming better with experience at phytobezoar removal.

Response: We quite agree with you, in order to decrease the difference between endoscopists, all procedures were performed by experienced endoscopists.

Q4. The size of the loop that can be made with this home made snare should be presented. it seems that this is the main point of the snare is the ability to section these very large phytobezoars and having a large snare is an advantage. How big can the snare be made?

Response: In Figure 1, we explained the method for making wire loop snare. In this way, we could obtain a loop with a variable diameter. after enter the stomach, the diameter of the guide-wire loop snare was adjusted according to the diameter of the persimmon stone. both ends of the guide-wire were then pulled back and forth, after which the stone was cut into small pieces by tightening the guide-wire loop snare. In our study, the

largest phytobezoar is 9cm, the self-made guide wire loop snare was successfully cut it into small pieces.

Q5. Although control group methods are described, it is unclear what was used in each patient, ie did every patient get the snare, the forcep, injection? It would be nice to include this information in the table.

Response: Considering the Reviewer's suggestion, we have added this data in part RESULTS 2.4 chapter.

Q6. This statement in the discussion "Before the end of the operation, intestinal obstruction during discharge into the intestine was prevented by cutting the persimmon stones into small pieces with widths of less than 1.5 cm. " The way it reads it seems that the authors meant greater than 1.5 cm rather than less than as it says smaller pieces were allowed to be discharged into the small intestine.

Response: We are extremely grateful to reviewer for pointing out this problem. We rewrote the sentence in the revised manuscript as following: Intestinal obstruction could be prevented by cutting the persimmon stones into small pieces with widths of less than 1.5 cm.

Q7. The grammar in this manuscript is a little confusing for Western readers and needs to be edited if this is intended for a global audience.

Response: We apologize for the language problems in the original manuscript. We send our revised manuscript to a professional English language editing company to polish the manuscript further.

Q8. It was not clear to me if the cohort presented in this manuscript were all of the patients with phytobezoars seen at the author's institution during this

time period. Were there others that were treated by other means during this period like by surgical removal.

Response: Yes, we presented all of the patients with phytobezoars during this time period. As chemical dissolution can be inadequate, and surgical treatments can often lead to complications, endoscopic methods for treating bezoars are frequently preferred in our endoscopy center. Only if endoscopy treatments is not effective, a patient will need surgery.

EDITORIAL OFFICE'S COMMENTS

Question for Science editor.

Response: Other conditions are consistent. 48 h before surgery, both groups were instructed to start taking Coca-Cola orally. No other drugs were used.