

## 83808 – Point-by-point responses to reviewers' comments:

Reviewer #1:

**Scientific Quality:** Grade C (Good)

**Language Quality:** Grade B (Minor language polishing)

**Conclusion:** Minor revision

**Specific Comments to Authors:** The paper reviews some relevant literatures in order to report recent advances and current challenges in endoscopic resection with the full-thickness resection device (FTRD). It is interesting and this review can also provide some guidance for clinicians. However, I have some comments. 1. The abbreviation in the title is not appropriate. 2. There were some grammatical mistakes in the manuscript. 3. Core tip section should be reorganized and be more concise. 4. The necessity of this paper should be clearly addressed in the Introduction.

**Response:**

1. Abbreviation has been removed from the title.
2. The manuscript has been carefully reviewed and all grammatical mistakes have been corrected
3. Core tip has been reorganized and made more concise (reduced word count from 90 to 80).
4. Necessity of review article/knowledge gap addressed by FTRD and this review has been included in the Introduction

Reviewer #2:

**Scientific Quality:** Grade C (Good)

**Language Quality:** Grade A (Priority publishing)

**Conclusion:** Accept (General priority)

**Specific Comments to Authors:** Specific suggestions for authors based on the checklist for manuscript review The first discovery in this manuscript is the introduction of instruments capable of simultaneous resection and closure. The next important point mentioned in this manuscript is that it is introduced as a resection method for huge lesions that were previously thought to be impossible with endoscopic resection. A third limitation of this study is again the management of unresectable disease. Comparisons with surgery, such as LECS, should be made in prospective studies. If a coping method is established, it will establish an epoch-making position as a non-invasive method for high-risk groups such as the elderly.

**Response:**

1. We agree that FTRD can be used for select lesions previously thought to be unresectable. Huge lesions especially larger than 3 cm may not be appropriate. We did include language throughout the manuscript about specific indications for its use.
2. The need for prospective comparison studies with novel minimally-invasive surgical techniques, such as LECS, has now been added in the future directions section.
3. We have included a statement in the conclusion section about how FTRD can potentially be a specifically beneficial and major advancement in resection methods for certain

groups traditionally felt to be high-risk for traditional resection methods/surgery, such as the elderly.

**(1) Science editor:**

The manuscript has been peer-reviewed, and it's ready for the first decision.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade C (Good)

**(2) Company editor-in-chief:**

I have reviewed the Peer-Review Report, the full text of the manuscript, the relevant ethics documents, and the English Language Certificate, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file. Please authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022. If an author of a submission is re-using a figure or figures published elsewhere, or that is copyrighted, the author must provide documentation that the previous publisher or copyright holder has given permission for the figure to be re-published; and correctly indicating the reference source and copyrights. For example, "Figure 1 Histopathological examination by hematoxylin-eosin staining (200 ×). A: Control group; B: Model group; C: Pioglitazone hydrochloride group; D: Chinese herbal medicine group. Citation: Yang JM, Sun Y, Wang M, Zhang XL, Zhang SJ, Gao YS, Chen L, Wu MY, Zhou L, Zhou YM, Wang Y, Zheng FJ, Li YH. Regulatory effect of a Chinese herbal medicine formula on non-alcoholic fatty liver disease. World J Gastroenterol 2019; 25(34): 5105-5119. Copyright ©The Author(s) 2019. Published by Baishideng Publishing Group Inc[6]". And please cite the reference source in the references list. If the author fails to properly cite the published or copyrighted picture(s) or table(s) as described above, he/she will be subject to withdrawal of the article from BPG publications and may even be held liable. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the Reference Citation Analysis (RCA). RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can

then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>.

**Response:**

We have included figures in a PowerPoint file.