

Reviewer #1:

**Scientific Quality:** Grade B (Very good)

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

**Conclusion:** Minor revision

**Specific Comments to Authors:** This study enrolled 114 patients with pancreatoduodenectomy over a recent 5-year period at a single center with a short time span and detailed and reliable data. Xie FL et al. used a retrospective, cross-sectional study to collect clinical data from 114 patients undergoing pancreaticoduodenectomy. The demographic factors, preoperative and perioperative characteristics and surgical complications were analyzed. Univariate and multivariate analyses were performed to identify risk factors for DGE after PD. The introduction part is detailed and comprehensive, involving a lot of background knowledge, and citing a lot of literature to introduce the research status of pancreatoduodenectomy. The results are interesting and add valuable knowledge to new treatment method. In addition, the manuscript also introduces the limitations of the research and the direction of follow-up research. I really thank for a useful and important synopsis of this important topic.

**Reply:** Thank you for your specific comment. Delayed gastric emptying (DGE) remains the most common complication after pancreatoduodenectomy (PD). The mechanism by which DGE occurs is unclear and often renders clinicians powerless to treat. Therefore, the investigation and analysis of risk factors for post-PD DGE is of great value for preventing DGE and improving the prognosis of patients undergoing PD. In this study, 114 patients who underwent PD surgery in the last 5 years were recruited for analysis to make the data as detailed and reliable as possible. We are pleased that the Introduction of this study has been recognized by you, and we will continue to keep the Introduction section of the study detailed and comprehensive, covering rich background information and citing a lot of literature to describe the current state of research. We are also pleased that the interestingness of the Results section, the description of research limitations and direction of follow-up research, the usefulness of the topic, and the importance of the synopsis have been recognized by you, and we will continue to maintain it in the future.

Reviewer #2:

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

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

**Conclusion:** Minor revision

**Specific Comments to Authors:** This study aims to identify related risk factors for delayed gastric emptying after the pancreatoduodenectomy procedure. The tables help the readers to make a more understanding of the study. The etiology of DGE is unknown, leading to poor treatment and prolonged hospitalization, which is a headache for clinicians. Based on the findings of this study, the authors made four instructive recommendations on the prevention of DGE after PD. In my opinion, the manuscript is written clearly and it's in acceptable form without any major changes; however, some minor concerns have been noted including: 1. The format of references should be modified. Also, the references should be updated with latest ones. 2. In the Part 1.5, Observation indicator lists many outcome measures, but the results do not seem to be fully presented.

**Reply:** Thank you for your specific comment. Although the incidence of serious

postoperative complications such as severe pancreatic leakage, biliary leakage, and massive bleeding has decreased with improved surgical techniques and increased perioperative management, the incidence of some other postoperative complications, especially DGE with unknown cause and no effective treatment, remains high in patients undergoing PD. Therefore, it is necessary to conduct an in-depth analysis of the risk factors associated with post-PD DGE and use tables to help readers better understand this study. We are pleased that you have recognized the clarity of the manuscript content and the acceptability of the form of this study. At the same time, in response to your questions, we have carefully reviewed and modified the format of the references in accordance with the requirements, and updated the references to the latest. For Part 1.5 *Observation indicators selected*, all of them have been listed in Table 1 and analyzed in Part 2.2 *Analysis of risk factors for post-PD DGE*. In addition, corresponding modifications have been made to maintain consistency.