



Reviewer 1

The gastroesophageal varices in the gastric fundus are the predominant collateral vessels. Esophageal-gastric variceal bleeding is among the most prevalent gastrointestinal emergencies and a primary contributor to mortality in patients with cirrhosis. Therapeutic strategies for esophageal-gastric variceal bleeding encompass pharmacotherapy, triple-lumen dual-balloon catheters for pressure hemostasis, endoscopic therapy, as well as interventional and surgical procedures. In recent years, the clinical efficacy of TIPS has garnered acknowledgment, attributed to the implementation of endovascular stent grafts and refined modulation of shunt diameters. In this study, the authors dedicated to probing the efficacy of TIPS in treating cirrhotic esophageal-gastric variceal bleeding and its influence on the prognosis of patients afflicted by the disease. The study is well designed and the methods are described in detail. In my opinion, this study can be accepted for publication after a minor revision. Comments: 1. The manuscript requires a minor editing. Some minor language polishing should be revised. 2. Please describe the limit of the study. 3. Please update the references list.

Response

1. We have already enlisted the help of a professional language editor to polish the language of this article.
2. Our work provides a theoretical basis for positioning TIPS as a frontline treatment for patients with cirrhosis complicated by EGVB. However, our study also has limitations. Firstly, this study is not a randomized controlled trial, but a retrospective study, which may be subject to selection bias and confounding factors. Secondly, this study lacked long-term follow-up, which is crucial for understanding changes in patient survival and quality of life in relation to TIPS treatment.
3. The reference list has been updated.