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Jin Gu, Varut Lohsiriwat, and Shu-You Peng

Editor-in-Chief

*World Journal of Gastrointestinal Surgery*

Dear Editor:

We wish to re-submit the manuscript titled, **“Efficacy of hybrid endoscopic submucosal dissection with SOUTEN in gastric lesions: an ex vivo porcine model basic study”** The manuscript ID is 63482.

We thank you and the reviewers for your thoughtful suggestions and insights. The manuscript has benefited from these insightful suggestions. I look forward to working with you and the reviewers to move this manuscript closer to publication in *World Journal of Gastrointestinal Surgery*

The manuscript has been rechecked, and the necessary changes have been made in accordance with the reviewers’ suggestions. The responses to all comments have been prepared and attached.

Thank you for your consideration. I look forward to hearing from you.

Sincerely,

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Reviewer#1

Comment #1. The number of figures and tables was high and decreased. In most magazines, the total number of tables and figures was 5, but here it was more.

Thank you so much for the important comment. According to your suggestion, the total number of tables and figures was reduced to 5 in the revised manuscript.

Reviewer #2

Comment #1. It is interesting to see the animal results using the endoscopic device SOUTEN. It is not convenient to perform the hybrid ESD using the tip of snare. The SOUTEN may provide the same feeling as Dual knife during hybrid ESD. However, it still remains to answer whether the curative efficiency for early cancer using hybrid ESD is the same as conventional ESD.

Thank you so much for the important comment. We agree with you that we are yet to answer whether the curative efficiency for early cancer using hybrid ESD is the same as conventional ESD in a clinical setting. As we mentioned in the Discussion, as a next step, we are currently conducting a prospective randomized controlled trial to determine it by comparing the treatment outcomes of ESD between hybrid ESD using SOUTEN and conventional ESD using conventional needle-type knives. We will obtain the answer in this future clinical study. In this clinical study, SOUTEN was used only in the hybrid ESD group, while other common endoscopic knives, such as Dual knife, Flush knife, and Splash-M knife, were used in the conventional ESD group due to ethical issue in clinical practice. That is why we conducted this basic study to determine whether and how hybrid ESD with SOUTEN was actually superior to conventional ESD with SOUTEN, where both procedures of hybrid ESD and conventional ESD were performed with SOUTEN. We emphasized this important point as a limitation of this study in the revised manuscript as follows.

The following sentences have been added to the revised manuscript (Page19, lines386-392):

Fourth, both procedures of hybrid ESD and conventional ESD were performed with SOUTEN. It remains to be determined whether the curative efficacy for early gastric neoplasms using hybrid ESD with SOUTEN is equivalent to conventional ESD using conventional endoscopic knives in clinical practice. We are expecting the result of a prospective randomized controlled trial currently conducted to confirm the superiority of hybrid ESD with SOUTEN over conventional ESD with conventional endoscopic needle-knives for early gastric neoplasms in clinical practice.