Response to reviewers' comments

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To reviewer 1

Comment 1: it is an exaggeration to say that ESD is feasible for early PESCC. Resection itself is certainly possible, but a long-term outcome is unclear.

Response: We appreciate the reviewer's suggestions. Early-stage PESCC is extremely rare in clinical practice and very few cases have been reported. optimal treatment strategy for early-stage PESCC of the esophagus has not been established. ESD has only been exploratory for early PESCC. There might be an opportunity to accumulate more cases where we can demonstrate its feasibility.

Rivesed portion are marked in the end of paragraph of discussion.

To reviewer 2:

Comment 1: early diagnosis was not possible and it became difficult to perform ESD. If cancer was diagnosed by EUS-FNB, the patient may have been possible to receive ESD. Please describe the significance of EUS-FNB

Response: Thanks for the suggestion. It has been reported that EUS-FNB has a very low positive rate of puncture for submucosal tumors < 2cm in diameter. Early-stage PESCC presents as a submucosal mass< 1cm in the muscularis mucosa, which is more superficial, deep biopsy or diagnostic resection, may be a better approach,

Comment 2: Surgery and chemotherapy are recommended for this disease. Please describe the indications for ESD for this disease.

Response: We appreciate the reviewer's suggestions. Early-stage PESCC presents as a submucosal mass in the muscularis mucosa, which is more superficial, The potential for curative resection of ESD improves the quality of life of patients compared to surgery. Of course, There might be an opportunity to accumulate more cases where we can demonstrate its feasibility.

Comment 3: The manuscript need be edited by native English speaker.

Response: Rivesed portion about grammatical and/or stylistic errors are marked in the paper.

Response for re-review comments:

Comments: Please describe the potential of EUS-FNB for diagnosing early PESCC and add some thought to the recurrence and long-term prognosis after ESD.

Answer: Early PESCC usually presents as submucosal masses with a diameter of less than 1cm. EUS-FNB may be difficult to obtain sufficient tissue volume, but it may be possible to implement it through clinical procedures. PESCC is a highly aggressive malignancy. Thus distant metastasis may occur in the early stages of PESCC, additional radiotherapy and chemotherapy should be followed after complete ESD resection. Close follow-up after ESD is also essential. There might be an opportunity to accumulate more cases to demonstrate the long-term prognosis after ESD.