Answering Reviewers

Dear editors and reviewers, here are the answering for the comments from reviewers.

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Conclusion: Minor revision

Specific Comments to Authors: Manuscript NO: 62488 Manuscript Type: Review Manuscript Title: Artificial intelligence-assisted endoscopic detection of esophageal neoplasia in early stage: the next step? Comments to the Author: This manuscript reviews the studies of AI in the screening of esophageal neoplasia including squamous cell carcinoma and adenocarcinoma. This manuscript is written well, and we understand the present status of AI in the detection and diagnosis of early esophageal cancer. However, there are several questions in this manuscript, and the followings are the comments to the authors.

Minor comments: 1. In Depth of invasion diagnosis (ESCC). Authors should indicate the concrete method (such as WLI, NBI and magnifying endoscopy) to measure the depth of ESCC with AI in Tokai et al. (29) research. 2. In AI in Endoscopic Detection of BE and EAC. Is there the study that showed AI's ability to measure the depth of esophageal adenocarcinoma? Authors should present these studies if there is it. 3. How is the application status of AI in the detection and diagnosis of esophageal cancer in comparison with that of gastric cancer and colon cancer?

Answering Reviewer#1: Thanks a lot for your positive comments. Here I answer the three questions one by one, and give a supplementary explanation of the revised content.

1. In the section of "In Depth of invasion diagnosis (ESCC)", the concrete method to measure the depth of ESCC with AI in Tokai et al. (29) research has been illustrated in details according to the original paper.

2. According to my search results, no articles related to AI measurement in EAC infiltration depth were found. However, AI has shown its ability to measure the depth of adenocarcinoma infiltration in gastric cancer and colon cancer. Therefore, it should be believed that in the near future, papers on the AI performance of measurement of EAC infiltration depth will appear. I wrote a small section about this topic named "Depth of invasion diagnosis of EAC".

3. The application status of AI in the detection and diagnosis of esophageal cancer in comparison with that of gastric cancer and colon cancer has been discussed in the first paragraph of section "Limitation of AI application in early EC detection".

4. As an addition, in order to answer the reviewers' questions and make the paper more complete, I have added 7 references in the revised manuscript.

Reviewer #2:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (High priority)

Specific Comments to Authors: This review article is well written, including recent papers.

Answering Reviewer#2: Thank you so much for your positive comments.