Dear sir,

We thank you and the reviewers for the valuable comments on our manuscript. We apologize for the duplicate submission (Manuscript numbers -72283 and 72284). The following are the pointwise replies to the comments on both submissions.

<u>#72283</u>

Reviewer #1: Scientific Quality: Grade C (Good) Language Quality: Grade B (Minor language polishing) Conclusion: Minor revision

Specific Comments to Authors: The manuscript entitled "Advances in the Imaging of Gastroenteropancreatic Neuroendocrine Neoplasms" summarizes the advances of imaging techniques in GEPNENs. The manuscript is well-prepared and acceptable if some small defects are addressed.

Comment 1. It is necessary to emphasize the focus of the manuscript, and add a discussion on favorable imaging techniques which can be applied to predict the grade of GEPNENs preoperatively in the last part.

Reply: Thank you for the comment. We have now included a short paragraph emphasizing on the imaging techniques which are useful in prediction of tumor grade in the last section, just prior to conclusion paragraph.

Comment 2. Future prospects for each imaging method should be added to each section.

Reply: Many of the described techniques in the review are not fully established in clinical practice and are evolving in their ability to predict the tumor grade and prognosis. Standardization of these techniques with more large scale studies would be an important future prospect. In addition, we have mentioned future prospects of some of the modalities (perfusion MRI, PET/CT and radiomics) in the manuscript.

Comment 3. I suggest the authors add a table to summarize some important clinical trials about the usage of imaging techniques in the clinical management of GEP-NENs.

Reply: Thank you for the comment. We have now added a table (Table 3) summarizing the details of important clinical trials on the advanced imaging techniques.

Reviewer #2: Scientific Quality: Grade C (Good) Language Quality: Grade B (Minor language polishing) Conclusion: Minor revision Specific Comments to Authors:

Comment (1) This manuscript deals with imaging of gastroenteropancreatic neuroendocrine neoplasms. It does not really break new ground, but it provides an overview on the topic, including illustrative images, and may also be seen as an incentive for further research. **Reply**: Thank you.

Comment (2) Endoscopic ultrasound: "EUS is particularly useful in the detection of benign insulinomas that lack somatostatin receptors and consequently not detected on somatostatin receptor scintigraphy/SPECT/PET and pancreatic and extrapancreatic (duodenal) gastrinomas, both of which have generally small size (average 1 cm) at detection." – This sentence requires improvement.

Reply: We have now revised the sentence for clarity.

Comment (3) Endoscopic ultrasound: "CEUS can also be performed through EUS with the use of second generation UCAs (eg. Sonovue), which produce harmonic signals at low acoustic powers has enabled CE - EUS at low acoustic powers." – This statement is unclear, please rephrase it.

Reply: We have now rephrased the sentence for clarity.

Comment (4) Perfusion CT: "NENs are among the tumors with significant angiogenesis and interestingly the relationship between intratumoral MVD and tumor prognosis are unlike those usually seen in other types of tumors." – Please correct this sentence.

Reply: We have now revised the statement.

Comment (5) Please check the names used in this manuscript (Computed tomography, third paragraph: "Rodallac" -> Rodallec; MR perfusion: "Toft's" model -> Tofts model (the name of its describer is Paul Tofts)).

Reply: We have now made the corrections as suggested.

Comment (6) Figure 3: "show large hypoenhancing areas" -> shows large hypoenhancing areas; a) -> a.

Reply: We have corrected the word as suggested.

Comment (7) Figure 4: "b-d. Color coded parametric maps for b) blood volume (b), blood flow (c) and mean transit time (d) of the normal pancreas and the tumor (arrow)" - please clarify this part of figure legend 4; A. -> a.; f) -> f.

Reply: We have now made the corrections as suggested.

Comment (8) Some language polishing is required; e.g., Diffusion kurtosis imaging: "infact" -> in fact; MR Elastography: "differentiation benign from malignant pancreatic masses" -> differentiation of benign from malignant pancreatic masses; etc.

Reply: We have now made the corrections as suggested.

<u>#72284</u>

Reviewer #1: Scientific Quality: Grade A (Excellent) Language Quality: Grade A (Priority publishing) Conclusion: Minor revision **Specific Comments to Authors:** In this article, the authors provide a comprehensive review of the various imaging modalities currently used in the evaluation of neuroendocrine neoplasms along with a discussion of the role of advanced imaging techniques. The manuscript is well-written and the content is helpful for improving the imaging diagnosis of gastroenteropancreatic neuroendocrine neoplasms.

Comment 1. The text label in Figs.2-5 should be re-label for better visualization by readers.

Reply: Thank you for the suggestion. We tried to improve the text within the images. However, since they are generated by the processing software, their size could not be altered. We have tried to mention the values in the legend for better understanding.

Comment 2. Radiomics, texture analysis and machine learning, it is better to provide some example cases.

Reply: We did initially think of adding an image of radiomics / texture analysis. However, the figure did not add much to the value of the manuscript as it only showed the region of interest marked and the rest is all values generated by the software. Hence, we decided to not include it.

Reviewer #2: Scientific Quality: Grade B (Very good) Language Quality: Grade B (Minor language polishing) Conclusion: Minor revision

Specific Comments to Authors: This is a good review on Advances in the Imaging of Gastroenteropancreatic Neuroendocrine Neoplasms. The Figures of this paper are very nice. Some suggestions:

Comment 1. The Tables should be shown as "Three-line table".Reply: We have now edited the tables as suggested.

Comment 2. Some sentences should be minor language polished.Reply: We have reviewed the manuscript for language and grammar and corrected any errors.

(1) Science editor:

The manuscript describes a review study of advances in the Imaging of gastro-entero-pancreatic neuroendocrine neoplasms. The topic is within the scope of the WJG. In this article, the authors offer a comprehensive review of the various imaging modalities currently used in the evaluation of neuroendocrine neoplasms along with a discussion of the role of advanced imaging techniques. The manuscript is well-written and the content is helpful for improving the imaging diagnosis of gastroenteropancreatic neuroendocrine neoplasms. So it could be acceptable for publication after a minor revision. The questions raised by the reviewers should be answered.

Language Quality: Grade A (Priority publishing)

Scientific Quality: Grade B (Very good)

Reply: Thank you for the positive comments. We have answered reviewers' comments.

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G:? Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file. Please authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content.

Reply: We have now resubmitted the figures as editable files and formatted the tables as suggested.

Thanking you,

Corresponding author.