1. COMMENTS FORM REVIEWERS

(1) Reviewer #1:

Scientific Quality: Grade B (Very good)
Language Quality: Grade B (Minor language polishing)
Conclusion: Accept (General priority)
Specific Comments to Authors: The authors analyzed the risk factors for LNM in superficial ESCC patients by evaluating detailed pathological characteristics, developed a nomogram by incorporating six variables, including tumor size, invasion depth, tumor differentiation, tumor budding, tumor infiltrative growth pattern and LVI and concluded that the nomogram is useful for predicting LNM risk by integrating all significant risk factors. Overall, the paper is well organized and proper presented. However, there are some minor issues need discussing. 1. The title "Risk factors and a predictive nomogram for lymph node metastasis in superficial squamous cell carcinoma" doesn't appear "esophagus". Suggestion: The title is better to add the word of " esophagus". Risk factors and a predictive nomogram for lymph node metastasis in superficial esophagus squamous cell carcinoma 2. All the data for this paper came from surgical specimens, which is not exactly equivalent to specimens of ESD patients. More studies should be taken in the future to confirm the reliability of the nomogram. Despite this, the use of this nomogram has a reference value for accessing the risk of LNM of post-ESD patients, guiding doctors to take further treatments or not. 3. Please pay particular attention to grammar, spelling and sentence structure so that the paper is more clear to read.

Response: Thank you very much for your valuable suggestion. We have added the "esophageal" in the title in revised manuscript. In this study, we developed a nomogram by incorporating six variables, including tumor size, invasion depth, tumor differentiation, tumor budding, tumor infiltrative growth pattern, and LVI, to facilitate the prediction of LNM risk for patients with superficial ESCC. The results showed that this nomogram using these six variables showed good discrimination with an area under the ROC curve (AUC) of 0.789 (95% CI, 0.737-0.841) in the training set and 0.827 (95% CI, 0.755-0.899) in the validation set. But our study also has some limitations as described in the "discussion" section, this is a single center retrospective study, we failed to perform external validation of this nomogram model, due to the lack of data from other hospitals. As you suggested, we will do some multicenter studies to further confirm the accuracy of the nomogram in the future. And we have checked all grammatical mistakes and asked professional English language editing services for language polishing of our revised manuscript. All your suggestions are very important to us, both for composing the manuscript and our further research. Thank you very much again.

(2) Reviewer #2:

Scientific Quality: Grade B (Very good)
Language Quality: Grade B (Minor language polishing)
Conclusion: Accept (General priority)
Specific Comments to Authors: The authors present the data of an interesting cohort of superficial ESCC patients regarding the predictors of LNM. Despite the importance of this issue, the manuscript design is is very proper. The baseline data of patients are well presented and the logistic regression of the potential risk factors is properly conducted, therefore, the results are reliable. The discussion session is concise and updated. Some English polishing is necessary, mainly in concordance. Congratulations for the authors.

Response: We are very grateful for your considerable advice. We have carefully edited the English language and grammatical errors in the revised manuscript. Additionally, we thank American Journal Experts for providing language polish to our revised manuscript.

2. EDITORIAL OFFICE'S COMMENTS

(1) Science editor:

The manuscript has been peer-reviewed, and it is ready for the first decision.
Language Quality: Grade B (Minor language polishing)
Scientific Quality: Grade B (Very good)

Response: Thank you very much for your comments. We have carefully revised the manuscript based on the reviewers' comments. And we have again asked professional English language editing services for language polishing of our revised manuscript.

(2) Company editor-in-chief:

The author(s) must include the keyword "esophageal squamous cell carcinoma" in the manuscript title. 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 conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2023. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the Reference Citation Analysis (RCA). RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: https://www.referencecitationanalysis.com/.

Response: Thank you very much for your valuable advice. We have added the "esophageal" in the title in the revised manuscript. And we have carefully revised the manuscript in accordance with the Peer-Review Report, Editorial Office's comments, and the Authors' Manuscript Review Criteria. The figures and tables have been carefully revised and re-uploaded as suggested. References have been updated in the revised manuscript. Thank you very much again.