

## Round 1

### Reviewer 1

In this opinion review, the author aim at describing the origin, definition, operative channels, advantages and future perspectives of SMIS.

My comments: (1) The manuscript contains grammatic, ortograph, semantic inaccuracies, the English level is not adequate for publication: I strongly recommend to have the manuscript reviewed by an English mother tongue scientific editor. (2) The first part of the manuscript (first page) is quite redundant and unfocused: I suggest the author to highlight that classic surgical operation are based on organ resection, however while this may be required for malignant tumor, when benign tumor need to be treated a more conservative management (including SMIS) may be used. The term SMIS was created in 2016, however the treatment modality aiming at removing the disease while preserving the organ function (mainly through operative endoscopy), already existed: this should be clearly stated in the manuscript. The author created a term which covers many surgical and endoscopic procedures, not a treatment modality. I understand that, being an opinion review, the author kepth the manuscript quite short, however I think that adding additional short examples of SMIS may be of benefit for the manuscript understandability.

### Answer

Thanks for your previous comments. We have revised the manuscript as you suggested. The details of our revision were as follows.

- (1) As you suggested, we have sent the revised manuscript to three native English speakers. The certification of English editing was attached. Thanks a lot.
- (2) Thanks for your recommendation. We have updated our descriptions of the first paragraph. In addition, we have added "SMIS included not only endoscopic surgery, but also some surgical operation. Therapies for diseases are developing with times and there are always more expected operative methods than existed ones." to make a better explanation for SMIS. Finally, we agree with you that adding examples of SMIS helps the readers to make better understanding of SMIS. We have added examples of SMIS based on four channels.

### Science editor:

1 Scientific classification: Grade D. 2 Language classification: Grade C. 3 Specific comments: (1) Please provide the Language certificate. The English-language grammatical presentation needs to be improved to a certain extent. There are many errors in grammar and format, throughout the entire manuscript. Before final acceptance, the authors must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>. (2) Please provide all fund documents. (3) The title cannot start with "the, a, an". (4) Recommendation: Transfer to other BPG journals (World Journal of Gastrointestinal Surgery).

### Answer:

Thank for your kindly suggestions. (1) As you suggested, we have send this revised manuscript to editing company, named American Journal Experts, as you suggested in WJG official website. (2) We have uploaded the funding information as you suggested. (3) As you suggested, we have deleted "the" and changed the title to "New direction of surgery: super minimally invasive

surgery”. (4) Thanks for your suggested. We think this manuscript is more suitable for World Journal of Gastroenterology than World Journal of Gastrointestinal Surgery.

**Company editor-in-chief**

I have reviewed the Peer-Review Report, the full text of the manuscript, the relevant ethics documents, and the English Language Certificate, 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. However, the quality of the English language of the manuscript does not meet the requirements of the journal. Before final acceptance, it is recommended that the author(s) provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>. When revising the manuscript, it is recommended that the author 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 PubMed, or a new tool, the RCA, of which data source is PubMed. RCA is a unique artificial intelligence system for citation index evaluation of medical science and life science literature. 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/>, or visit PubMed at: <https://pubmed.ncbi.nlm.nih.gov/>.

**Answer:**

Thanks for your effort in improving the quality of our manuscript. We have sent the revised manuscript to editing company, named American Journal Experts, as you suggested. In addition, we have searched some related highlight articles and indexed them in this manuscript based on the searching results from <https://www.referencecitationanalysis.com/>.

## Round 2

### SPECIFIC COMMENTS TO AUTHORS

I believe the authors significantly improved the quality of their manuscript. However I have some additional comments. It would have been nice to have the changes done in the new manuscript version highlighted in red, in order to allow me to make a better evaluation of the changes done.

#### Answer

Thank you for your kind comments. I apologize for failing to highlight the revisions in the revised manuscript. In this rerevised manuscript, the changes are in red text as you suggested.

I suggest to highlight the fact that SMIS may be indicated uniquely for benign tumors and that for malignant tumor the preferred surgical management consists now and probably will consist in the surgical removal of the organ surrounding the tumor. Probably SMIS may also be indicated for unfit patients affected by early stage malignant tumor, however this should be specified in the manuscript, if the authors agree.

#### Answer

Thank you for your valuable comments. I agree with you that SMIS is also indicated for malignant tumors in the early stage. Endoscopic submucosal dissection (ESD) has become the preferred choice for early gastrointestinal cancer without lymph node metastasis. Partial gastrectomy and lymphadenectomy are performed during laparoscopy or open surgery.

I also suggest to highlight that impact of SMIS is clinically significant in particular for benign tumors located in particular sites (as suggested by the example of the cardia tumor ). The authors state to agree with me concerning the need for additional examples of SMIS, however I can not see additional examples in the manuscript.

#### Answer

Thank you for your suggestion. I agree with you that the impact of SMIS is clinically significant, particularly for benign tumors located at particular sites.

As you suggested, we added benign GISTs located in the rectum to compare SMIS and traditional surgery.

In the answer to reviewers, the authors state that they added the sentence "SMIS included not only endoscopic surgery, but also some surgical operation. Therapies for diseases are developing with times and there are always more expected operative methods than existed ones.". This sentence is not written with an adequate english style. Please correct /improve it.

#### Answer

Thank you for your reminder. I apologize for this mistake. We have resent the revised manuscript to AJE, which provides English editing by native English speakers and the appropriate certification. I hope the revised manuscript is now satisfactory.