

Dear Reviewers:

Thank you very much for your precious time and your pertinent opinion!

We have revised the text one by one according to your comments as follow,

Reviewer #1:

1. Abstract: Good, could you kindly state which stage of colon cancer was in your initial inclusion criteria?

**Answer:** Thanks. We added “ **with right-sided colon cancer (TNM stage I, II, or III)** ”

2. Introduction: Good, But I suggest mentioning of the current guidelines, not just the debate about the topic to enrich the background for the reader.

**Answer:** Thanks. We mentioned the NCCN guidelines in introduction” The NCCN guidelines for colon cancer recommended laparoscopic surgery for patients with curable colon cancer” .

3. It is not clear why the surgeons chose one procedure or the other, was it the choice of the patients or due to specific patients' risk? Please explain. Also, please add a flow chart to show the selection of the patients. –

**Answer:** Thanks. We added a flow chart to show the selection of the patients. Professor Yuan used the classic medial approach(MA) before 2018 like other surgeons., After he proposed the cranial-medial mixed dominant approach (CMA ) in 2018 ,we mainly used CMA for laparoscopic right hemicolectomy. We don't choose approach based on the patient's condition or specific patients' risk. This is a retrospective clinical study, by the way .We have exact records of which approach we used for each surgery.

4. There is no laboratory preparation stated in the work up of the patients or base line staging? could the authors give more details about these important points.

**Answer:** Thanks. We added laboratory preparation stated in the work up of the patients or base line staging,” Pre-operative blood transfusion and albumin transfusion in case of anemia and hypoproteinemia, respectively” ,” followed by contrast-enhanced CT of the chest, abdomen, and pelvis to assign a clinical stage (cTNM), and received radical colectomy operation, were selected from the database.”

5. In the sentence “ we found the anatomic projection of the the ileocolic vessel pedicle” please remove the extra “the”.

**Answer:** we revised it.

6. Please add laboratory data at baseline and postoperative.

**Answer:** we added laboratory data at baseline and postoperative.(Table. 1 and 2),and added corresponding contents in the result

7. Please discuss this relevant study: Comparing standard laparoscopic hemicolectomy to CME radical right colectomy for patients with right sided colon cancer: a randomized controlled feasibility trial, Rutgers, Marieke et al. European Journal of Surgical Oncology, Volume 46, Issue 2, e15

**Answer:** Thank you very much!! We added” **There is a multi-centre, prospective, randomized trial comparing conventional (laparoscopic) right hemicolectomy with robotic CME for patients with right sided colon cancer in 4 centres in the UK currently underway, and we are very**

much looking forward to its results”

8. Conclusion: Too long, please summarize and remove citations. Also, you mention the lack of RCTs, but there is an ongoing one, please mention (citation added previously in the comments).

**Answer:** we deleted the references, and re-write the conclusion.

9. Please add a table of the baseline and post operative laboratory data

**Answer:** we added laboratory data at baseline and postoperative to Table. 1 and Table.2

Reviewer #2:

1. Aim of work is not well-clarified at the end of section of "Introduction".

**Answer:** Thanks. We clarify the aim by added “ This approach allows better control of surgical risks, more compliant with CME requirements, more standardized and reproducible.”

2. Results: This sentence mentioned the same group in comparison "The number of lymph nodes collected in the MA group was  $30.50 \pm 15.31$ , significantly more than that in the MA group ( $23.81 \pm 9.06$ )".

**Answer:** we revised it.

3. Conclusions: Please, you may not use references within text of conclusion. You may may transfer the sentences documented with references to discussion; and re-write your own conclusion followed by the recommendation.

**Answer:** We deleted the references, and re-write the conclusion.

Thank you very much for your precious time and your pertinent opinion again !!

Your sincerely Lin L and Yuan SB

2021.11.14