

Dear editor,

We thank the reviewers for providing constructive feedback. We have fully revised our manuscript and addressed all of the reviewers' comments. The latest published articles indexed and included on RCA database have been cited in the revised manuscript. The language of revised manuscript has been polished by a professional English language editing company and we hope it meets the requirements for publication. Please see below for a point-by-point response to the reviewers' comments.

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: This manuscript showed the role of *TEP1* and *RECQL5* gene polymorphisms in heart rate after gastrectomy for gastric cancer. This is interesting and well written. However, it will require some revisions before publication. 1, Please summarize tables and figures. 2, Please show clinical methods to prevent sudden decreases in heart rate during extensive peritoneal lavage with distilled water from this analysis.

Response:

1. First, we summarized all tables and figures at the end of manuscript according to the Format for Manuscript Revision. Second, we added subheadings in the RESULTS section so that readers could better understand the content of the charts.

2. We have discussed some clinical methods and suggestions to prevent sudden decreases in heart rate (HR) during extensive peritoneal lavage with distilled water at the end of manuscript: "In the future, when performing tumor resection and peritoneal lavage with distilled water, we suggest anesthesiologists assess the risk of sudden HR drop based on the genetic polymorphisms of *RECQL5* (rs820196) and *TEP1* (rs938886 and rs1713449), and medical history. If patients are at high risk and the baseline HR is <40 beats/min, vasopressors such as norepinephrine, epinephrine, dopamine, and phenylephrine will be recommended before surgery. During the perioperative period, all patients are routinely monitored for arterial blood pressure by electrocardiography. An anesthetic machine is used to support breathing and monitor end-expiratory carbon dioxide partial pressure. Once the HR decreases by 30% or <40 beats/min after lavage, vasopressors should be used immediately. If cardiac arrest occurs, cardiac compression should be performed immediately, so that the heartbeat pause time is strictly limited to 1 min. Extensive peritoneal lavage with warm distilled water is widely used in surgery for breast cancer, lung cancer and gastrointestinal cancer. The purpose of this study was to screen high-risk groups through the SNP detection of high-risk genes, and focus on improving safety during the perioperative period."

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: This is an interesting manuscript about the relation of TEP1 and RECQL5 gene polymorphisms to sudden decreases in heart rate during peritoneal lavage. This manuscript is nicely structured and well written. I have no question about this manuscript.

Response: We appreciate reviewer's positive comments.

Thank you for your attention and time. We look forward to hearing from you.

Yours sincerely,

Shuang Yao