

Response to Editor and Reviewers

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Dear Editor,

We are pleased to receive the reviewer's comments and suggestions on our manuscript entitled "Current trends in perioperative treatment of resectable gastric cancer." We have reviewed the manuscript and made revisions as per your suggestions. Additionally, we have corrected grammar and syntax errors. References, tables, and other manuscript sections have been revised and formatted according to journal style. Thank you for your comments and time.

Response to Reviewer 1:

We appreciate the reviewer's valuable comments, suggestions, and time dedicated in reviewing the manuscript. Please find our responses and corresponding revisions made to the manuscript shown below:

The authors reviewed the current status and possible future developments of perioperative therapy for locally advanced resectable GC. However, there are several publications that summarize the current evidence regarding the role of perioperative treatment in resectable gastric cancer and explore future directions in research. This manuscript may not have special features compared to the published reviews. Otherwise, the topics of this manuscript are too large to highlight its key points. In addition, this manuscript lists and describes the literature but doesn't present enough of the author's viewpoint. The following suggestion may improve the quality of this manuscript:

1. Background was described not good, which cannot catch readers. Additional writing inputs could be given to the background, specifying the core of the review

compared to other reviews that have been already published and how it is different than other reviews. Or maybe minimizing the scope of topic.

Response: The entire manuscript has been revised from the beginning to the end, where necessary, the manuscript sections/texts have been re-arranged, unnecessary texts were deleted, and improvements were made.

2. In each section, a little summary and the opinion of the authors will be presented.

Response: As suggested, brief summary and comments for each section are presented in the revised manuscript.

3. In CHALLENGING ASPECTS AND FUTURE PERSPECTIVES and Conclusions, most of them summarize the existing research results, and less discuss the future research trends.

Response: Thank you for pointing this out for us. In the revised manuscript, evidence and considerations for the potential future perioperative use of molecular therapies and immunotherapies are presented in this section.

4. It is recommended that the authors do a thorough review of the manuscript for grammatical and typographical errors.

Response: The manuscript in its entirety has been thoroughly revised by a native English speaker

5. The quality of Figures and tables could be promoted

Response: The quality of the figure and tables have been improved, as suggested.

Response to Reviewer 2:

We appreciate the reviewer's pertinent comments and suggestions. Thank you for your time. Please find our responses, revisions, and corrections according to your suggestions shown below:

The author summarized the current trends in perioperative treatment of resectable gastric cancer. The author describes the precision medicine of GC and the role of immunotherapy in GC treatment. Perioperative therapy for locally advanced resectable GC and randomized clinical trials are also reviewed. According to the research content and purpose, the paper concludes the current trends of the resectable gastric cancer. However, the paper needs to be minor revised.

Comments:

1. The recent advance of new molecular biomarkers predicting the prognosis and efficiency during perioperative treatment of resectable gastric cancer

Response: Necessary improvements have been made to the revised manuscript to address the reviewer's comments.

2. Please add tables describe the landmark and ongoing trials of biological and immunological agents in perioperative treatment of gastric cancer regarding Her-2 Target Therapy, VEGF Target Therapy, and Immune Checkpoint Inhibitors.

Response : Table 2 has been added, as suggested.