Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

**Conclusion:** Minor revision **Specific Comments to Authors:** 

The dual-modality endoscopy therapy consisting of duodenoscopy and laparoscopy were discussed in this study, the former of which can remove extrahepatic bile duct stones through ERCP, while the latter can clean intrahepatic bile duct stones via laparoscopic resection. Laparoscopy combined with intraoperative duodenoscopy for cholecystolithiasis combined with choledocholithiasis patients is associated with higher surgical success, lower pain levels, and shorter hospital stays than with preoperative duodenoscopy. In this study, the authors included 95 patients with intra- and intra-hepatic bile duct stones and compared the clinical effects of combination therapy vs traditional laparotomy, and aiming at providing an optimized scheme for the surgical treatment of such patients. The study is well designed and performed. The results are very interesting. Minor comments: 1. The manuscript has to be edited. Some minor language polishing should be revised. 2. The abstract should be rewritten as, background, aim, methods, results, and conclusion. 3. Images should be improved. 4. The limit of the study should be discussed.

Reply: Thank you for your specific comments. Cholangiolithiasis is a kind of gallstone that occurs in the hepatobiliary system, with its etiology associated with cholestasis, bile duct infection, bile duct stenosis or obstruction, and the presence of foreign bodies in the bile duct. Once the disease develops, it often does not resolve on its own. Moreover, intrahepatic bile duct stones can easily progress into choledochiopathy and become extrahepatic bile duct stones, which may then deteriorate into liver cirrhosis and even liver cancer. At present, surgery remains the major treatment for intrahepatic and intrahepatic bile duct stones, but the success rate is not satisfactory with a certain risk of postoperative complications. Therefore, it is also necessary to optimize and explore the surgical treatment of intrahepatic and intrahepatic bile duct stones, which is of great significance to improve the treatment experience of such patients. Thanks for your recognition, we will continue to keep the study well-designed, well executed and the results interesting. We have made careful revisions one by one according to your suggestions. For language editing and polishing, we have hired a professional English editing expert to make corresponding revisions. In addition, the Abstract section has been reconstructed with labels such as background, objective, methods, results, and conclusions. The image quality has also been modified accordingly. The limitations of this study have been carefully supplemented in the discussion section.