## Reply to the reviewer's and editorial office's comments

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The Editor World Journal of Gastrointestinal Surgery

Dear Sir,

Thank you for reviewing our manuscript entitled "Emerging molecules, Tools, Technology and Future of Surgical Knife in Gastroenterology" (manuscript no.91344) and asking us to resubmit the revised manuscript. We have gone through the comments and have made the necessary and suitable changes as asked by the reviewer and the editorial office.

In the revised manuscript, the changes have been highlighted in yellow colour. Two tables have been added.

Point by point, the reply to the reviewers' comments are as follows:

Comments – Reviewer 1	Reply
1&2	Thank you for your comment, but
1. This is a review article. 2. Please review the literature and add more	this is not Review article. It has
details in the discussion section.	been framed as an editorial as it
	was requested so it was not
	reviewed extensively in terms of
	review of literature. However, in
	the revised manuscript we have
	added more details relevant to the
	topic
3) Please also summarize in the form of Table.	Summary in form tables 1 and 2
	have been added in revised
	manuscript
4) Please recommend to the readers "How to apply this	Applications of AI has been
knowledge?".	discussed in revised manuscript
	both in the tables and also in the
	text
Reviewer 2 – Comments	
1)Emerging Molecules, Tools, Technology and Future of Surgical	Thanks for the appreciation.
Knife in Gastroenterology This paper provides an editorial account on	indiks for the uppreclation.
various aspects of managerial and curative developments in	
gastroenterological surgery. They include molecular, drugs,	
biomarkers, tools, and future technology such as AI. Focus is placed on	

those related to treating patients with oncology. The editorial is well structured and written. The content is relevant and mostly up to date.	
2) Since the paper focuses on the emerging and future of surgical gastroenterology, the detailed historical accounts on surgery in ancient eras or non-contemporary progresses may be omitted, shortened, or made more concise. Please consider.	We have made changes as per suggestion in <b>historical aspect</b> in more concise form
3) Critical comparative discussions within groups of techniques would be welcome. They include pros/ cons of those approaches as well as their benefits and concerns. Please summarize right after each section, according to the authors' own experiences and critiques.	We have tried to discuss various technique and their pros/cons in revised manuscript
4). The discussions on AI driven robotic surgery are very much richer than those related to molecular, biopsy, biomarkers discovery. Please attempt to balance these sections.	We have tried to balance the section on emerging molecules, biomarkers by adding more details in revised manuscript.
5)Please tone down the surgical prospectives (2nd from last paragraph). Currently, they are exaggeratedly compared with a more futuristic innovation. Although the authors' predictions seem foreseeable and of course entirely feasible, they were based very little on the literature reviews herewith. Please rewrite, and provide statements whose supports could be found in the cited references.	We agree with the reviewer comment and presently no literature directly support it and its authors personal thought about the future of the surgery. All this thought can open new areas for the future research.
Reviewer 3 – Comments	
1) The manuscript should be re-edited and organized for clearer understanding by introducing headings and subheading which are lacking.	We have reedited and organised by introducing the heading and subheading as suggested.
2) There should be an introduction about the emerging technologies in the field of surgical gastroenterology, followed by the historical perspective, then expanding into the emerging advances and innovation one by one.	Relevant changes have been made as suggested.
3) Although this is an editorial the contents are very brief and did not satisfy my appetite to learn more about each emerging technology and innovation in endoscopic surgery and interventional gastroenterology.	We have tried to elaborate the various sections and included separately the innovation in endoscopic surgery and interventional gastroenterology.
4) There should be a section on the ethical issues related to these new technologies and innovations.	Section on ethical issues have been considered and added in revised manuscript

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<ul> <li>5) I would have liked to see more concentration on various emerging interventional procedures in gastroenterology e.g., endoscopic surgery for GERD, obesity, etc., and MIS, SILS and robotics.</li> <li>6) There should be a conclusion section.</li> <li>7) Little is mentioned about the surgical knife. Please, expand and elaborate.</li> </ul>	Section various interventional procedures have been added in revised manuscript. Conclusion section added Surgical knife in future has been
Editorial office comments	revised as suggested
<ol> <li>Science Editor:</li> <li>Conflict of interest statement: Academic Editor has no conflict of interest.</li> </ol>	
<b>2 Scientific quality:</b> The author submitted a study of emerging molecules, tools, technology and future of surgical knife in gastroenterology. The manuscript is overall qualified.	Thank you very much for acknowledging our review article.
<ol> <li>Advantages and disadvantages: The reviewer have given positive peer-review reports for the manuscript.</li> <li>Classification: Grade B, Grade D and Grade D; Language Quality: Classification: Grade B, Grade B and Grade B. The article summaries the emerging molecules, tools, technologies</li> </ol>	Manuscript has been reedited and heading and subheadings have been added.
and surgical knife in the field of gastroenterology. However, the manuscript needs to be revised. <b>The manuscript should</b> <b>be re-edited and organized for clearer understanding by</b> <b>introducing headings and subheading which are lacking</b> . Please review the literature and add more details in the	Discussion sections have been elaborated with new references as to make the editorial clearer for understanding.
discussion section. Please tone down the surgical prospectives (2nd from last paragraph). Currently, they are exaggeratedly compared with a more futuristic innovation. Although the authors' predictions seem foreseeable and of course entirely feasible, they were based very little on the literature reviews herewith.	Relevant changes along with the relevant citations have been added.
<b>(2) Main manuscript content:</b> The author clearly stated the purpose of the study and the research structure is complete. However, the manuscript is still required a further revision according to the detailed comments listed below.	Manuscript has been edited
(3) Table(s) and figure(s): There are no Figures and no Tables.	Table for application of artificial intelligence has been added.

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(4) <b>References:</b> A total of 24 references are cited, including 11 published in the last 3 years. The reviewer didn't request the authors to cite improper references published by him/herself.	Various other citations have been added of recent years.
<b>3 Language evaluation:</b> 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: <a href="https://www.wjgnet.com/bpg/gerinfo/240">https://www.wjgnet.com/bpg/gerinfo/240</a> .	English language certificate will be provided before final acceptance
<b>4 Specific comments:</b> (1) Please provide the filled conflict-of-interest disclosure form.	Conflict of interest form attached
(2) Please provide the PMID numbers ( <u>https://pubmed.ncbi.nlm.nih.gov/</u> ) and DOI citation numbers ( <u>https://doi.crossref.org/simpleTextQuery</u> ) to the reference list and list all authors of the references. If a reference has no PMID and DOI, please provide the source website address of this reference.	PMID/DOI- Updated
(3) Please add the author's contribution section. The format of this section will be as follows: Author contributions: Wang CL, Liang L, Fu JF, Zou CC, Hong F and Wu XM designed the research; Wang CL, Zou CC, Hong F and Wu XM performed the research; Xue JZ and Lu JR contributed new reagents/analytic tools; Wang CL, Liang L and Fu JF analyzed the data; Wang CL, Liang L and Fu JF wrote the paper.	
<ul> <li>(4) Please add the content of the abstract section. An informative, unstructured abstract of no less than 200 words should accompany each manuscript.</li> <li>Abbreviations must be defined upon first appearance in the Abstract. Do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition.</li> </ul>	Abstract added
<b>5 Recommendation:</b> Transfer to other BPG journals.	
Language Quality: Grade B (Minor language polishing)	

Scientific Quality: Transfer to another BPG Journal	We accept to transfer to other BPG journal
2) Company Editor-in-Chief:	
I recommend the manuscript to be published in the World Journal of Gastrointestinal Surgery.	
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 <i>Reference Citation Analysis</i> ( <i>RCA</i> ), of which data source is PubMed. <i>RCA</i> 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 <i>RCA</i> database for more information at: https://www.referencecitationanalysis.com/, or visit PubMed at: <u>https://pubmed.ncbi.nlm.nih.gov/</u> .	