

Response to reviewers

Reviewer's code: 00041858

We will submit to World Journal of Gastrointestinal Surgery as you suggest.

Reviewer's code: 00058573

We will accumulate more cases.

Reviewer's code: 01558002

We did not compare with SILS-TEP in our hospital because the number of SILS-TEP is few. But we referred to the reports of other hospitals as line 5, page 10 in manuscript.

Reviewer's code: 00158975

- 1 The rate of incisional hernia is nothing.
- 2 We used just only catheter to degas intraperitoneal cavity and the cost is equal between iSTEP and SILS-TEP as line 6, page 10 in manuscript.
- 3 The common complications after TEP was referred to those reports as line 6, page 10 in manuscript.

Reviewer's code: 02549885

- 1 We added how to close the peritoneum. The peritoneum is ligated by 3-0 Vicryl and the ligation is unfolded at the time performing intraperitoneal observation as line 13, page 7 in manuscript.
- 2 We attach A multi-channel access port (GelPOINT MINI; Applied Medical, Rancho Santa Margarita, CA, USA) in preperitoneal space, and so there is no gas leakage.
- 3 We used TAPP for patients that underwent prostate surgery and had severe adhesion in the preperitoneal space as line 3, page 11 in manuscript .