SPECIFIC COMMENTS TO AUTHORS

I appreciate this great chance to review this great manuscript. I learned a lot from the article.

Response: Thank you very much for your review.

SPECIFIC COMMENTS TO AUTHORS

I have read this review article focus on endoscopic management for ampullary lesions

sent to be publish in on oncology journal. As endoscopist no new data has been

provided or no algorithm/table ilustrases the manuscript. If the objective is to

disseminate knowledge of endoscopic management of ampullary tumors, at least a table

with key points is mandatory (for example: rentability of biopsies, indications vs

constraindications for endoscopic treatment, en bloc vs. piecemeal resection, mucosal

resection vs submucosal dissection, medical therapy prior to ERCP to prevent adverse

events (NSAIDs, hydration, etc), endoscopic follow-up, what about in patients with

familial adenomatous polyposis, etc

Response: We appreciate the reviewer's suggestions; your suggestions is very good. We

have also considered adding a summary table about endoscopic management of

ampullary tumors. However, consensus has not been reached in many aspects, in this

manuscript we mainly summarized the recent advancements in the EP technique. The

complications and associated managements have been reported in a lot of literature, so

we add a table with key points about this. As suggested, we have added the detailed

contents about familial adenomatous polyposis.

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SPECIFIC COMMENTS TO AUTHORS

The article is written in plain and clear English. The diagnosis, treatment and follow-up of ampullary adenomatous lesions are well summarized in the light of current data.

Response: Thank you very much for your review.

SPECIFIC COMMENTS TO AUTHORS

I read the article with great enthusiasm since endoscopic resection of the duodenal papilla has been shown to be an effective procedure with lower rates of morbidity and mortality compared to surgical treatment. As it is a recent therapeutic option, the forms of approach are very heterogeneous between the groups. Despite this, the authors were able to objectively and clearly review the most important points about endoscopic papillectomy. As a way of improving the study, I believe that the title should make it clear that it is a review article. In addition, the authors could describe how the methodology for the biiographic survey was and which databases were used to prepare the review.

Response: We thank the reviewer for these observations. Accordingly, we have revised our title and described the methodology for the biographic survey and databases were used to prepare the manuscript.

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SPECIFIC COMMENTS TO AUTHORS

This review article on Endoscopic papillectomy is good and very interesting. This work

is technically sound. This work has been tailored with available literature. I appreciate

this work which would be greatly useful in the management of ampullary adenomatous

lesions.

Response: Thank you very much for your review.

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