

RESPONSE TO REVIEWERS

We are pleased to inform you that, after preview by the Editorial Office and peer review as well as CrossCheck and Google plagiarism detection, we believe that the academic quality, language quality, and ethics of your manuscript (Manuscript NO.: 70287, Systematic Reviews) basically meet the publishing requirements of the *World Journal of Gastrointestinal Surgery*. As such, we have made the preliminary decision that it is acceptable for publication after your appropriate revision.

Upon our receipt of your revised manuscript, we will send it for re-review. We will then make a final decision on whether to accept the manuscript or not, based upon the reviewers' comments, the quality of the revised manuscript, and the relevant documents.

Please follow the steps outlined below to revise your manuscript to meet the requirements for final acceptance and publication.

ANSWER: THANK YOU. BELOW WE HAVE ATTACHED OUR RESPONSES TO ALL SUGGESTIONS MADE BY THE EDITORIAL OFFICE AND THE REVIEWERS. WE FEEL STRONGLY THAT THE MANUSCRIPT HAS SIGNIFICANTLY IMPROVED AFTER BASED UPON YOUR VALUABLE SUGGESTIONS.

1 MANUSCRIPT REVISION DEADLINE

We request that you submit your revision in no more than **14 days**. **Please note that you have only two chances for revising the manuscript.**

ANSWER: WE ARE SUBMITTING OUR RESPONSE BEFORE 14 DAYS AS REQUESTED.

2 PLEASE SELECT TO REVISE THIS MANUSCRIPT OR NOT

Please login to the F6Publishing system at <https://www.f6publishing.com> by entering your registered E-mail and password. After clicking on the "Author Login" button, please click on "Manuscripts Needing Revision" under the "Revisions" heading to find your manuscript that needs revision. Clicking on the "Handle" button allows you to choose to revise this manuscript or not. If you choose not to revise your manuscript, please click on the "Decline" button, and the manuscript will be WITHDRAWN.

ANSWER: WE HAVE COMPLETED THIS FOLLOWING THE SUGGESTION MADE BY THE EDITORIAL OFFICE AND REVIEWERS. THANK YOU.

3 SCIENTIFIC QUALITY

Please resolve all issues in the manuscript based on the peer review report and make a point-by-point response to each of the issues raised in the peer review report. Note, authors must resolve all issues in the manuscript that are raised in the peer-review report(s) and provide point-by-point responses to each of the issues raised in the peer-review report(s); these are listed below for your convenience:

ANSWER: WE HAV MADE ALL POINT-BY-POINT RESPONSES FOLLOWING YOUR RECCOMENDATION. THANK YOU.

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors:

1.The authors mentioned in Methods of Abstract that the electronic databases include Gray literature, however, disappeared in Methods of main article, right? Also I am wondering which data is coming from Gray literature?

ANSWER: IN EFFORT TO PROVIDE CLARITY TO THE READER, WE HAVE REMOVED THIS LANGUAGE FROM THE MANUSCRIPT. THE TERM "GREY LITERAURE" IS SOMETIMES USED FOR ARTICLES ABSTRACTED FROM THE REFERENCE LIST OF MANUSCRIPTS. AS SUCH, WE HAVE SPECIFICALLY STATED THIS AND REMOVED THIS TERM TO AVOID CONFUSION.

2.In my view, in Figure 1, the title of Bariatric Endoscopy should be added to all three sections or not.

ANSWER: THE TERM BARIATRIC ENDOSCOPY REFERS TO ALL THREE SECTIONS. WE AGREE WITH YOUR COMMENTS AND HAVE MADE MODIFICATIONS TO FIGURE 1 FOLLOWING YOUR VALUABLE SUGGESTION.

3.More references should be listed to make the data more accurate, such as the edge of the GJA that APC can performed.

ANSWER: THANK YOU FOR YOUR VALUABLE SUGGESTION. WE HAVE MODIFIED OUR MANUSCRIPT TO INCLUDE SEVERAL REFERENCES TO SUPPORT OUR STATEMENTS. THANK YOU.

4. In this article, the authors list some applications of endoscopic technology in weight loss, but the discussion and conclusion focus on describing the complications of weight loss surgery, which needs multidisciplinary cooperation and better medical team. Therefore, I think more obvious causality and evidence are needed to draw the above conclusions.

ANSWER: THANK YOU FOR YOUR VALUABLE SUGGESTION. WE HAVE REVISED THE MANUSCRIPT TO INCLUDE REVISIONAL THERAPIES AND MODIFIED THE CONCLUSION AS SUGGESTED.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors:

The article is within the scope of the journal. It is well written and easy to read. The described proposal is original and represents an advance in the area of knowledge.

ANSWER: THANK YOU FOR YOUR COMMENTS. OUR GROUP HAS A LARGE EXPERIENCE IN BARIATRIC ENDOSCOPY AND BASED ON THE LITERATURE AND DATA ASSOCIATED WITH OUR EXPERIENCE, WE HAVE ATTEMPTED TO SUMMARIZE THE ROLE OF BARIATRIC ENDOSCOPY IN THIS REVIEW ARTICLE. THANK YOU.

However, the article to be accepted must be improved in some aspects:

ANSWER: THANK YOU FOR YOUR VALUABLE SUGGESTIONS. WE HAVE MADE ALL REQUESTED MODIFICATIONS IN THE REVISED VERSION OF THE MANUSCRIPT.

a) The introduction and the state of the art on the subject matter should be improved.

ANSWER: WE HAVE SIGNIFICANTLY IMPROVED THE INTRODUCTION AS REQUESTED. THANK YOU FOR YOUR VALUABLE SUGGESTION. WE FEEL THIS HAS GREATLY IMPROVED THE MANUSCRIPT.

b) The discussion section needs to be improved. In this section, the results obtained with other similar works should be compared, describing the advantages and disadvantages of the proposal. For this, references to other similar works should be used.

ANSWER: THANK YOU FOR YOUR COMMENT. FOLLOWING YOUR SUGGESTION, AND ALSO THE SUGGESTION OF ANOTHER REVIEWER, WE HAVE INCLUDED SEVERAL REFERENCES TO THE TEXT TO IMPROVE THE QUALITY OF THE MANUSCRIPT AND PROVIDE SUPPORTING DATA. WE HAVE DISCUSSED ALL THERAPIES IN THIS REVIEW AND SUMARIZED THE DATA IN ADDITIONAL TO PROVIDING CENTER'S EXPERIENCE AND OPINIONS. FURTHERMORE, WE HAVE INCLUDED MORE DATA IN THE DISCUSSION AS REQUESTED AS WELL.

c) In the conclusions section, the synthetic presentation of the scientific results obtained should be improved.

ANSWER: THANK YOU FOR YOUR VALUABLE SUGGESTION. WE HAVE SIGNIFICANTLY MODIFIED THE CONCLUSION PER THE RECOMMENDATION.

4 LANGUAGE POLISHING REQUIREMENTS FOR REVISED MANUSCRIPTS SUBMITTED BY AUTHORS WHO ARE NON-NATIVE SPEAKERS OF ENGLISH

As the revision process results in changes to the content of the manuscript, language problems may exist in the revised manuscript. Thus, it is necessary to perform further language polishing that will ensure all grammatical, syntactical, formatting and other related errors be resolved, so that the revised manuscript will meet the publication requirement (Grade A).

Authors are requested to send their revised manuscript to a professional English language editing company or a native English-speaking expert to polish the manuscript further. When the authors submit the subsequent polished manuscript to us, they must provide a new language certificate along with the manuscript.

ANSWER: THIS MANUSCRIPT AND REVISED VERSION WAS WRITTEN, EDITED, AND REVIEWED BY A NATIVE ENGLISH SPEAK (THOMAS R MCCARTY). THIS INDIVIDUAL IS AN ADVANCED ENDOSCOPIST AT BRIGHAM AND WOMEN'S HOSPITAL - HARVARD MEDICAL SCHOOL WITH MORE THAN 100 PEER-REVIEW PUBLICATIONS. ADDITIONALLY, WE ARE SUBMITTING A LETTER BY THOMAS R MCCARTY ATTESTING TO THE FACT HE HAS WRITTEN AND REVISED THE MANUSCRIPT.

Once this step is completed, the manuscript will be quickly accepted and published online. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>.

5 ABBREVIATIONS

In general, do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition. Certain commonly used abbreviations, such as DNA, RNA, HIV, LD50, PCR, HBV, ECG, WBC, RBC, CT, ESR, CSF, IgG, ELISA, PBS, ATP, EDTA, and mAb, do not need to be defined and can be used directly.

The basic rules on abbreviations are provided here:

(1) Title: Abbreviations are not permitted. Please spell out any abbreviation in the title.

(2) Running title: Abbreviations are permitted. Also, please shorten the running title to no more than 6 words.

(3) Abstract: Abbreviations must be defined upon first appearance in the Abstract. Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*).

(4) Key Words: Abbreviations must be defined upon first appearance in the Key Words.

(5) Core Tip: Abbreviations must be defined upon first appearance in the Core Tip. Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*)

(6) Main Text: Abbreviations must be defined upon first appearance in the Main Text. Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*)

(7) Article Highlights: Abbreviations must be defined upon first appearance in the Article Highlights. Example 1: Hepatocellular carcinoma (HCC).

Example 2: *Helicobacter pylori* (*H. pylori*)

(8) Figures: Abbreviations are not allowed in the Figure title. For the Figure Legend text, abbreviations are allowed but must be defined upon first appearance in the text. Example 1: A: Hepatocellular carcinoma (HCC) biopsy sample; B: HCC-adjacent tissue sample. For any abbreviation that appears in the Figure itself but is not included in the Figure Legend textual description, it will be defined (separated by semicolons) at the end of the figure legend.

Example 2: BMI: Body mass index; US: Ultrasound.

(9) Tables: Abbreviations are not allowed in the Table title. For the Table itself, please verify all abbreviations used in tables are defined (separated by semicolons) directly underneath the table. Example 1: BMI: Body mass index; US: Ultrasound.

ANSWER: WE HAVE FOLLOWED ALL RULES OF THE JOURNAL.

6 EDITORIAL OFFICE'S COMMENTS

Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are listed below:

ANSWER: THANK YOU. WE HAVE FOLLOWED ALL THE SUGGESTIONS MADE BY THE REVIEWERS AND THE EDITORIAL OFFICE AS LISTED ABOVE. WE ARE CONFIDENT THAT THE MANUSCRIPT HAS SIGNIFICANTLY IMPROVED BASED UPON ALL OF THE VALUABLE SUGGESTIONS.

(1) Science editor:

The article is within the scope of the journal. 1.It is well written and easy to read. The described proposal is original and represents an advance in the area of knowledge.and it could be acceptable for publication after a minor revision. The questions raised by the reviewers should be answered. Classification: double Grade C. 2.Language Quality: double Grade B . 3.Recommendation: Giving a recommendation of conditional acceptance to BPG journal.
Language Quality: Grade B (Minor language polishing)
Scientific Quality: Grade B (Very good)

(2) Company editor-in-chief:

I recommend the manuscript to be published in the World Journal of Gastrointestinal Surgery.

7 STEPS FOR SUBMITTING THE REVISED MANUSCRIPT

ANSWER: THANK YOU.

Step 1: Author Information

Please click and download the [Format for authorship, institution, and corresponding author guidelines](#), and further check if the authors names and institutions meet the requirements of the journal.

Step 2: Manuscript Information

Please check if the manuscript information is correct.

Step 3: Abstract, Main Text, and Acknowledgements

(1) Guidelines for revising the content: Please download the guidelines for Original articles, Review articles, or Case Report articles for your specific manuscript type (Systematic Reviews) at: <https://www.wjgnet.com/bpg/GerInfo/291>. Please further revise the content your manuscript according to the Guidelines and Requirements for Manuscript Revision.

(2) Format for Manuscript Revision: Please update the format of your manuscript according to the Guidelines and Requirements for Manuscript Revision and the Format for Manuscript Revision. Please

visit <https://www.wjgnet.com/bpg/GerInfo/291> for the article type-specific guidelines and formatting examples.

(3) Requirements for Article Highlights: If your manuscript is an Original Study (Basic Study or Clinical Study), Meta-Analysis, or Systemic Review, the “Article Highlights” section is required. Detailed writing requirements for the “Article Highlights” can be found in the Guidelines and Requirements for Manuscript Revision.

(4) Common issues in revised manuscript. Please click and download the [List of common issues in revised manuscripts by authors and comments](#) (PDF), and revise the manuscript accordingly.

Step 4: References

Please revise the references according to the [Format for References Guidelines](#), and be sure to edit the reference using the reference auto-analyser.

Reminder: It is unacceptable to have more than 3 references from the same journal. To resolve this issue and move forward in the peer-review/publication process, please revise your reference list accordingly.

Step 5: Footnotes and Figure Legends

(1) Requirements for Figures: Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file, and submit as “70287-Figures.pptx” on the system. The figures should be uploaded to the file destination of “Image File”.

(2) Requirements for Tables: Please provide decomposable Tables (in which all components are movable and editable), organize them into a single Word file, and submit as “70287-Tables.docx” on the system. The tables should be uploaded to the file destination of “Table File”.

Reminder: Please click and download the [Guidelines for preparation of bitmaps, vector graphics, and tables in revised manuscripts](#) (PDF), and prepare the figures and tables of your manuscript accordingly.

Step 6: Automatically Generate Full-Text Files

Authors cannot replace and upload the “Manuscript File” separately. Since we only accept a manuscript file that is automatically generated, please download

the "Full Text File" or click "Preview" to ensure all the contents of the manuscript automatically generated by the system are correct and meet the requirements of the journal. If you find that there is content that needs to be modified in the Full-Text File, please return to the corresponding step(s), modify and update the content, and save. At this point, you then have to click the "Save & Continue" button in Step 5 and the F6Publishing system will automatically regenerate the Full-Text File, and it will be automatically stored.

Step 7: Upload the Revision Files

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- (2) 70287-Audio Core Tip
- (3) 70287-Biostatistics Review Certificate
- (4) 70287-Conflict-of-Interest Disclosure Form
- (5) 70287-Copyright License Agreement
- (6) 70287-Approved Grant Application Form(s) or Funding Agency Copy of any Approval Document(s)
- (7) 70287-Non-Native Speakers of English Editing Certificate
- (8) 70287-Video
- (9) 70287-Image File
- (10) 70287-Table File
- (11) 70287-PRISMA 2009 Checklist
- (12) 70287-Supplementary Material

If your manuscript has supportive foundations, the approved grant application form(s) or funding agency copy of any approval document(s) must be provided. Otherwise, we will delete the supportive foundations.

If your manuscript has no "Video" or "Supplementary Material", you do not need to submit those two types of documents.

8 COPYRIGHT LICENSE AGREEMENT

ANSWER: THANK YOU. ALL AUTHORS HAVE FOLLOWED THE JOURNAL INSTRUCTIONS.

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9 CONFLICT-OF-INTEREST DISCLOSURE FORM

ANSWER: THANK YOU. THE ICMJE FORM WAS COMPLETED AND UPLOADED.

Please click and download the fillable [ICMJE Form for Disclosure of Potential Conflicts of Interest](#) (PDF), and fill it in. The Corresponding Author is responsible for filling out this form. Once filled out completely, the Conflict-of-Interest Disclosure Form should be uploaded to the file destination of 'Conflict-of-Interest Disclosure Form'.

Best regards,

Lian-Sheng Ma, Editorial Office Director, Company Editor-in-Chief, Editorial Office

Baishideng Publishing Group Inc

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA

Telephone: +1-925-399-1568

E-mail: l.s.ma@wjgnet.com

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