Reviewer #1:

**Scientific Quality:** Grade C (Good)

**Language Quality:** Grade A (Priority publishing)

**Conclusion:** Minor revision

**Specific Comments to Authors:** Minor revisions: - revise the references: in the text, you cite 12 references but only give 11 in the reference list. Comment: ctDNA has not only shown to be more sensitive than CA 19-9, but also to be more sensitive than current gold standard radiological methods (computed tomography) in the display of actual tumor burden at staging (micro dissemination or advanced lymph node status) and restaging (relapse detection); see for example doi: 10.1016/j.ejso.2021.11.138 (12/21) and doi: 10.3389/fonc.2022.902177 (08/22)

R: thank you very much for the suggestions. There are 11 reference in this revised version and we added 2 more references (as suggested) regarding the effectiveness of ctDNA detection in comparison with the radiological gold standard.

Reviewer #2:

**Scientific Quality:** Grade B (Very good)

**Language Quality:** Grade A (Priority publishing)

**Conclusion:** Accept (General priority)

**Specific Comments to Authors:** The letter to the Editor entitled “Circulating tumour DNA in gastrointestinal cancer in clinical practice: just a dream or maybe not?” describes some considerations of the potential role of circulating tumor DNA (ctDNA) in the management of gastric, biliary, liver, pancreatic and colorectal cancer. In my opinion, this manuscript can be published in current form.

R: thank you very much your kind comments.