

Prato, 21 January 2016

Dear editor and peer-reviewer,

first of all thank you very much for the interest in our article and for the comments to it. We tried to answer in our best way to the peer reviewer and we will be pleased to extend the explanations if there will be the need. We answered point by point to the peer reviewer and highlighted in yellow the changes in the paper.

- 1) Peer-reviewer question: some of the contents in 'Material and Methods' should be moved to the 'Result' section.

Our answer: the phrases "*There were 58 laparoscopic rectal resections with TME (L-TME) and 53 robotic rectal resections with TME (R-TME)*" and "*The median follow-up period for all cases was 37.4 months (range 2–85 months). There were no patients lost to follow-up*" have been moved from methods to result section.

- 2) Peer-reviewer question: why laparotomy instead of laparoscopy was used to confirm the diagnosis?

Our answer: this was a mistake. We had 11 anastomotic leakage (8 LTME and 3 RTME) and all of them have been reoperated. The approach have been laparoscopic in 8 of them and 3 had a laparotomy due to their general status. I have corrected the term laparotomy with "surgery".

- 3) Peer-reviewer question: why the median was used instead of the mean for the length of follow-up and operative time?

Our answer: our statistician said that median is an index stronger than mean because is less influenced by anomalous values (and especially in operative time there are some values that are very different, for example when surgery was performed by trainees even if they were supervised by our expert colorectal surgeon). In all our papers we used the median but if this is a problem now, we can use the mean.

- 4) Peer-reviewer question: I find it difficult to accept the fact that "any incision longer than 6 cm is considered a conversion to an open procedure". Most of the extraction sites in laparoscopic colorectal surgery for cancer exceed 6 cm.

Our answer: this was just a way of classify. Due to this fact we removed the phrase.

- 5) Peer-reviewer question: rephrase the term 'hysteroannessiectomies'. Did you mean hysterectomy and salpingo-oophorectomy?

Our answer: thank you. We corrected the term with your suggestion.

- 6) Peer-reviewer question: I am not sure why length of hospital stay in patients who underwent laparoscopic surgery was 2 days longer than the robotic group. I also find your explanation non-convincing.

Our answer: this is an obscure results. We tried to find an explanation in our numbers and attitudes, but we haven't found any results that could explain this fact. We accept every suggestion!

- 7) Peer-reviewer question: under Oncologic long-term outcomes: what is meant by the primitive diagnosis? Did you mean the primary diagnosis?

Our answer: thank you. We corrected the term with your suggestion.