

Dear Reviewers,

We very much appreciate the time and effort you have provided in reviewing our manuscript. We are aware of the need for minor revisions following this review. We have endeavoured to undertake these revisions in as thorough and comprehensive manner as possible.

Reviewer 1: We have gone back through the manuscript to correct any potential spelling errors. We have also standardised the manuscript language to English (UK) on Microsoft Word.

Reviewer 2: Changes have been made to the manuscript, in particular the abstract and introduction, in order to highlight the focus of the article principally on neoadjuvant radiotherapy. P13- the study containing follow-up data from the Lyon trial has been included in the main body of the article. P14- the intent of the authors was to compare outcomes in patients with interval ≥ 8 weeks between completion of radiotherapy and surgery to those with an interval < 8 weeks. The sentences containing this information have been revisited and altered, thus, providing more clarity. P15- the need for long-course radiotherapy in patients aiming for rectal preservation has been included in the paragraph. P20- a definition of Complete Clinical Response (cCR) has been moved forward in the article ahead of the review of articles by Habr-Gama. P22- changes regarding the indication for TAE have been made. Regarding endocavitary irradiation, we have included the studies mentioned in your review into Table 3 of the manuscript.

Reviewer 4: Both the title and abstract have been changed to focus more on neoadjuvant radiotherapy. Segments of the abstract have also been deleted in order to provide more clarity and avoid potential confusion ie the section on surgical options outlined in your review. We have gone through the entirety of the article and been specific when describing neoadjuvant therapy ie radiotherapy or combination chemoradiotherapy. Further detail has been provided in the surgical therapy section to help better explain what is involved in each procedure described. In the introduction section, the sentence regarding 2018 incidence data has been deleted with the 2019 data remaining. We have also started the Radiotherapy section of the article with the paragraph ("Neoadjuvant therapy") that you advised.