Dear editor:

Thanks very much for reviewing our manuscript titled “Effect analysis of distal serosal turnover technique assisted EFTR for gastric submucosal masses under floss traction”.

In response to your valuable comments, we have revised the manuscript and the submission procedure. Follow is the point by point response.

1. Some typos are present within the manuscript, please fix them.
Response: We greatly appreciate your valuable suggestions. After a thorough review, we have made the necessary corrections to the manuscript, including fixing typographical errors and inappropriate descriptions. The revised manuscript now includes these corrections highlighted in yellow.

Response: Your advice has been immensely helpful, and we have carefully examined the literature you recommended. The comparison between endoscopic resection and laparoscopic surgery for gastrointestinal stromal tumors has enabled us to better highlight the advantages of endoscopic resection in certain situations. Consequently, we have referenced this paper in the revised manuscript.

3. DISCUSSION: “EFTR has gradually become popular since it was first used by Zhou Pinghong et al, and now it is the preferred treatment for SMT originating from the muscularis propria or the tight adhesion between the tumor and the serosa that cannot be separated, with a complete resection rate of 87.5%-100.0%”
   ◄ This sentence is not fully supported by currently available international guidelines (i.e., D'Souza LS, Yang D, Diehl D. AGA Clinical Practice Update on Endoscopic Full-Thickness Resection for the Management of Gastrointestinal Subepithelial Lesions: Commentary. Gastroenterology. 2024;166(2):345-349. doi:10.1053/j.gastro.2023.11.016; Deprez PH, Moons LMG, O'Toole D, et al. Endoscopic management of subepithelial lesions including neuroendocrine neoplasms: European Society of Gastrointestinal
Response: We appreciate your expert recommendations. Thanks to your guidance, we have thoroughly reviewed and analyzed the guidelines and expert consensus on the endoscopic treatment of gastrointestinal submucosal tumors. We have corrected any inaccurate or non-standard descriptions in the manuscript and have also updated the references accordingly.

We are once again grateful for your dedication to this manuscript, and we eagerly anticipate your feedback.

Thanks very much for your attention to our paper.

Very sincerely yours.

Shumin Qin