

## Peer Review File

Article information: <https://dx.doi.org/10.21037/aoe-21-1>

---

### Reviewer A

The article is interesting and had a good deal of interesting days. However, the article needs extensive corrections to grammar, vocabulary and language.

Eg instead of saying "Despite of approach", you can say "Irrespective of approach" in the initial paragraph. Many similar changes need to be made in the text.

Reply: Thank you for your appreciation. We did the English revision with a certificated institution and resend the text.

---

### Reviewer B

Thank you very much for your manuscript. The narrative review is interesting and informative. But it seems there's nothing new and the data is out there already.

Reply: I appreciate your opinion. However this is a theme suggested by the editorial and we tried explore the data about this to have focus on OTSCs therapy for gastrointestinal wall treatment. Because this demand of the special editorial team that we discuss about this theme.

---

### Reviewer C

I think that you should also include in discussion the intraluminal vacuum sponge. I think mostly that small chronic lesions that fails to resolve fully with SEMS or sponge can be managed in 2nd phase with clips. However, often the leakage is too frail to initiate therapy with clips. E.g. start with SEMS for 2-3 weeks -> continue with clips if needed.

Reply: Thank you for your comments. Endoscopic therapy for gastrointestinal wall defects have many modalities. The question is that we received an invitation letter by the special editorial team to write a paper just about over-the-scope clips and application for esophagic perforation. So, we agree with your opinion, however we are following previous demands.

---