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## **Review Comments**

The paper titled "Application of the intestine diversion tube with a double-balloon without ileostomy in low rectal cancer" is interesting. The use of the intestine diversion tube with a double-balloon was feasible in animal experiments and was safe and effective. The procedure is simple, and suitable for popularization and application in the clinic. However, there are several minor issues that if addressed would significantly improve the manuscript.

1) There have been many studies on low rectal cancer. What is the difference between this study and previous studies? What is the innovation? These need to be described in the introduction.

Reply: We have described the advantages of drainage tubes in our experiment, the shortcomings of traditional studies, and the innovations in our experiment.

Changes in the text: We have modified our text as advised (see Page 3-4, line 77-93).

2) What are the effects of the methods of this study on postoperative bowel function? It is recommended to add relevant contents.

Reply: It had no effect on postoperative bowel function.

Changes in the text: We have modified our text as advised (see Page4, line 105-108).

3) This study is only for animal experiments, suggesting that it may be more meaningful to increase clinical case studies.

Reply: This is the first step of our study, which was also mentioned in the discussion. In the next step of the study, we will continue to optimize the tube and verify and apply it in the clinic.

Changes in the text: No.

4) Compared with other methods, what are the biggest advantages and disadvantages of this research method? It is recommended to add relevant contents.

Reply: We elaborated them in the discussion part.

Changes in the text: We have modified our text as advised (see Page 8, line 241-258).

5) How does the diversion tube with a double-balloon affect the postoperative rehabilitation of patients and the efficacy of controlling postoperative complications? It is recommended to add relevant contents.

Reply: It can speed up postoperative rehabilitation and reduce postoperative complications.

Changes in the text: We have modified our text as advised (see Page 8, line 250-254).

6) The current status of epidemiological research on low rectal cancer should be added to the discussion.

Reply: We added the contents in the discussion part.

Changes in the text: We have modified our text as advised (see Page 7, line 197-203, Page 10-11, line 333-340).