

Peer Review File

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Reviewer A

The manuscript represents an interesting discussion from an international group of physicians, treating esophageal squamous cell carcinoma. The discussion centers around the difficulties in accurately, determining the clinical T2 versus T3 stage for these patients. It is interesting to understand the thought process of the different physicians in recommending potential treatments for these patients. Obviously, there are international variations in the approach to treating these patients. The discussion is somewhat illuminating in understanding how the disease is treated in different areas of the world.

The title should be changed to reflect multidisciplinary team.

Well, this discussion is interesting and holds some value, it is unclear what the impact of this publication would actually be.

Reply: Thanks for your helpful comments and suggestions to improve the quality of this manuscript. According to your recommendation, we have changed the title to “Collaborative Multidisciplinary Management and Expertise of cT2-3 Locally Advanced Operable Esophageal Squamous Cell Carcinoma”, in order to reflect multidisciplinary team and its important role.

We also make a highlight Box in Line 86 to show the impact of this publication.

Changes in the text: We have modified the title and highlighted it in red. Please refer to the title page for the updated information.

Reviewer B

I have to admit that I am a bit unclear on the purpose of this manuscript. There are 2 cases mentioned but the discussion that follows has little, if anything, to do specifically with these particular cases. After a brief discussion of the cases, the opinions of a number of physicians then follows. While the controversy over the importance of being able to differentiate T2 vs T3 staging is potentially interesting, the discussion that follows is repetitive and reflects individual opinion than representing necessarily expert consensus or standard of care. Thus I do not find it helpful. What would be more useful is potentially a Delphi study examining this question. A review article on the methods/accuracy of different staging modalities and/or treatment paradigms of cT2 vs cT3 cancer based on studies (not opinions) would also be more helpful.

Reply: Thanks for your helpful comments and suggestions to improve the quality of this manuscript. First, this is an article published in the “JTD MDT corner” on the multidisciplinary

discussion of cases and is not an expert consensus. However, this point of view inspires that the evaluation and treatment decision of cT2-T3 in esophageal cancer is a controversial topic in the discussion of multidisciplinary experts. It is very helpful to generate expert consensus based on Delphi method for the basis of this multidisciplinary management and expertise. It will also be very helpful for the design and implementation of related clinical research work in the next step.

Changes in the text: We also supplemented the content in the objective section “Line 136-137: This ambiguous diagnosis can affect the implementation of treatment decisions and even the prognosis of patients.”

Reviewer C

The authors present a can series of two patients with clinical T2-3N0 sec esophageal cancer treated with neoadjuvant chemotherapy and esophagectomy. Various experts then give their opinion on treatment and staging systems. While this is a somewhat difficult and controversial entity, it is not particularly unique to warrant a case report. A more formal review of the literature with regard to EUS accuracy and treatment of t2 and t3 would be more relevant

Reply: Thanks for your helpful comments and suggestions to improve the quality of this manuscript. This is an article submitted in the “JTD MDT Corner” section on the multidisciplinary discussion of cases, which was mainly focused on the MDT opinions and viewpoints. However, according to your suggestion, we found insufficient information in terms of EUS, in addition to former expert views, we supplemented the relevant contents in the Introduction and Discussion parts.

Changes in the text: We have supplemented the contexts and highlighted it in red. Please refer to the Line 115-123 for the updated information.
