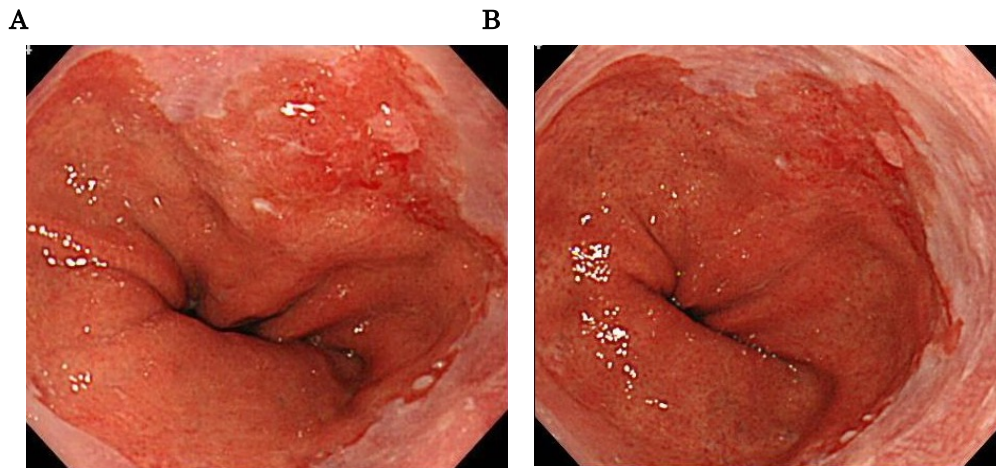
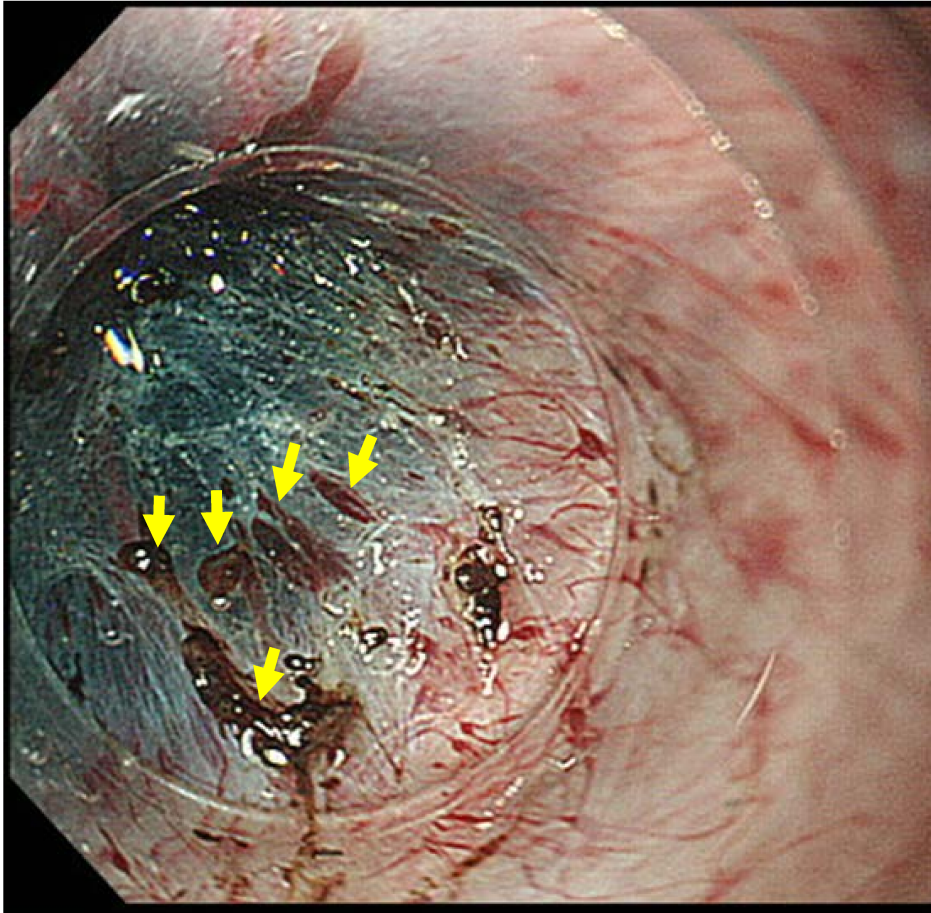


Supplementary Figure 1.

When the inflammation at the GOJ is active, the distal ends of palisade vessels (DEPV) become invisible or obscured. On the left panel (A), the hyperemic and erosive mucosa at the one to two o'clock direction obscured the DEPV, whereas the proximal end of gastric folds (PEGF) can easily be recognizable. On the right panel (B), a little distant view, DEPV can be seen only at the five o'clock direction. In such cases, PEGF can be used as a landmark for GOJ (Endoscopic images are provided by Prof. TG).

Supplementary Figure 2.

During the submucosal dissection in the per-oral endoscopic myotomy (POEM) for achalasia, judgement of the distal end of the dissection of lower esophageal sphincter is important to achieve satisfactory outcomes. As shown in the arrows, the unique spindle veins present in the gastric, but not in the oesophageal submucosa, represent a good landmark for stopping the submucosal dissection. For more detail of the POEM procedure, readers may refer to the reference (No. 47, Maselli R et al. *World J Gastrointest Endosc* 2016; 8: 690-6) (Endoscopic image is provided Prof. HI.)