Format for ANSWERING REVIEWERS

July 31, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 20331-edited.doc).

Title: Evaluation of a multiplex PCR assay for detection of cytomegalovirus in stool samples from patients with ulcerative colitis

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We greatly appreciate reviewers' valuable comments, which improve our paper.

We have revised and added the figures for better understanding.

The manuscript has been improved according to the suggestions of reviewers:

1. Format has been updated.

2. Revision has been made according to the suggestions of the reviewers.

(1) Answers to comments of referee #2529364

Q1. Were these two kits different multiplex PCR kits?

A1. A multiplex PCR assay includes three detection kits (Meningitis V1, Diarrhea B1, and Diarrhea B2).

Q2. What was the sensitivity of Seeplex Diarrhea in detection of CMV?

A2. As Seeplex Diarrhea B1 and B2 kits do not detect CMV, we have applied Seeplex Meningitis kit for detection of CMV. To date, sensitivity and specificity of CMV by this Meningitis kit for stool analysis have not reported officially. Our results may indicate its high sensitivity.

Q3. Please state whether the prevalence of other pathogens were statistically different between groups.

A3. We have conducted the analysis of EBV and HHV6 and found additional findings. We have added the description.

Q4. Please change the word "isolated" to "detected".

A4. We have revised the word as suggested.

(2) Answers to comments of referee #1429143

Q1. Please better specify the characteristics of patients under investigation: were all with diarrhea?

A1. All of the UC active patients had diarrhea. We have revised the description.

Q2. The test is very sensitive for presence of CMV, but (much) probably less specific for clinically relevant CMV infection. Which patients should be treated with antiviral therapy?

A2. We agree the reviewer's comment. Our prospective study was not designed to compare the different modalities for the detection of CMV, however; the results will help predict CMV infection prior to the development of intestinal symptoms, which is important for the prevention of exacerbation of UC by CMV reactivation. Positive PCR results may help to rapidly diagnose patients at a high risk for CMV infection. We have added the description.

Q3. Why the stools were collected by endoscope.

A3. As this study is a novel approach to detect enteropathogens, we should analyse fresh samples which prepared from fresh stool. Therefore, we have collected stool from patients who underwent endoscopy. We are planning to analyse stool samples which are collected by the patients at home. We have added the description.

Q4. It will be interesting to know the frequency of another high prevalent virus (EBV) in this cohort with respect to presence on the different subgroups of patients, including UC.

A4. We have conducted the analysis of EBV and HHV6 and found additional findings. We have added the description.

3. References and typesetting were corrected.

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

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