

Response to Reviewer 00061704

- 1) It is a good question. Fecal calprotectin is important in both diagnosis of CD and its differential diagnosis. However, it has not been introduced to our hospital yet. So we didn't include it into this retrospective study.
- 2) As this study was a retrospective study, all patients had a definite diagnosis of either CD or PIL. Thus, the diagnosis of IBS had been excluded before.

Response to Reviewer 00057695

- 1) As far as we know, this article is the first study trying to developing a scoring system that includes various parameters on differential diagnosis between CD and PIL. We tried to include all of the valuable parameters in this model. So this scoring system is exploratory. If we used the scores of 1 and 0, it would only bring a different cut-off value, with the same diagnostic efficacy. For example, a 43-year-old man, with a major complaint of abdominal pain and weight loss for 2 months. Biopsy through DBE confirmed diffuse large B cell lymphoma(DLBCL). CTE revealed thickened bowel wall for up to 20mm, and aneurysmal dilation. DBE showed proliferative mass with irregular ulcer. The score of our differential model was -7.
- 2) This study is a retrospective study. All CD patients got a definite diagnosis for more than 1 year. On the other hand, all PIL patients were with a histological diagnosis which had been mentioned in "patients enrolled" part. The aim of our study was to provide a more objective model to avoid misdiagnosis. As it comes to the differential diagnosis with other ulcerative diseases of GI tract like intestinal tuberculosis or Behcet disease, more prospective studies should be carried out in the future. This has been illustrated in limitation of our study in "discussion" part.
- 3) None of the enrolled patients was complicated with both CD and intestinal lymphoma or intestinal lymphoma in pre-existing CD which had been added in the "patients enrolled" part.
- 4) I agree that FDG-PET/CT is an excellent noninvasive method in evaluating bowel inflammation especially in deep intestine that is hard to access by endoscopy. As far as we know, for severe inflammation, it has similar SUV with that of malignancy. In the future, we may carry out more research to determine if there is any significant difference.
- 5) The typographical and grammar errors had been further polished. And the sentences with ambiguous meanings had been rephrased.