

Comment number	Comments	Author response	Location of text change
<b>Reviewer 1 (02440884)</b>			
1.	Digital solutions are innovative key technologies to solve the problem of data sampling and providing. This point should be more addressed and a process for the registries should be suggested.	We thank the reviewer for their time in reading the manuscript and making this suggestion. We would like to respectfully observe that the objective of this manuscript is to describe the need for the collection of iron parameters in IBD patients and feel that a detailed explanation of how this may be achieved is beyond the remit of this article and the technical knowledge and expertise of the authors. The text has therefore been revised to provide more detail about the potential for electronic data collection in registries, through the software available to run registries and also the growth in electronic collection of patient-reported outcomes.	Pages 11 and 12.
<b>Reviewer 2 (02446483)</b>			
1.	The authors have evidenced an important niche in IBD. Iron deficiency without anemia and iron deficiency anemia are common and frequently overlooked complications of IBD. Patients affected by IBD may present with both Fe-deficient anemia and Fe-deficiency without anemia. It would be marvelous to have a registry to rely on this feature. Despite the frequency and impact of iron deficiency in inflammatory bowel disease, there are gaps in our understanding about its incidence, prevalence and	We thank the reviewer for their time in reading the manuscript and providing their recommendation for acceptance.	No changes to text.

	natural history of Fe-deficiency in IBD. Yes, I fully agree with the authors that this objective could be achieved through collection of specific laboratory, clinical and patient-reported measurements and this data being incorporated into existing registries. This review describes the status of current European inflammatory bowel disease registries and the data they generate.		
<b>Reviewer 3 (00004011)</b>			
1.	Very interesting and well documented.	We thank the reviewer for their time in reading the manuscript and providing their recommendation for acceptance.	No changes to text.