

Dear Editor,

The authors are thankful for the revisions in the manuscript entitled "*Yield of capsule endoscopy in obscure GI bleeding - a comparative study between premenopausal and menopausal women*" for consideration for publication in *World Journal of Gastrointestinal Endoscopy*, as a *Retrospective Study*.

Therefore we proceed to explore and detail the corrections suggested by the reviewers:

**1) The authors should clarify more the reason why this comparison is necessary in patient with OGIB.**

It is of great relevance to clarify capsule endoscopy (CE) findings and outcomes of CE study between premenopausal (PMW) and menopausal women (MW). In this subset of patients, mainly in PMW blood loss arising from other comorbidities may lead physicians to suspect an obscure gastrointestinal bleeding (OGIB).

Thus in the introduction the authors added the following considerations: "*Taking this in consideration it is necessary to clarify the differences in DY, TY and rebleeding in OGIB between PMW and MW. In PMW with suspected OGIB CE study may not be of first choice, considering the possibility of gynecologic blood loss and the lower rates of small bowel lesions.*"

**2) The diagnostic ratio of CE is reported to be dependent on the period between CE examination and the bleeding. The authors should these data between two groups.**

The authors added data from the timing of CE, and correlated this variable with diagnostic yield (DY) as well as therapeutic yield (TY).

Thus in the results the authors added the following considerations: "*Considering the timing of CE most patients were studied >14 days (88.0%, n=161) while a minority underwent CE within the first 14 days (48hours-14 days in 8.2%, n=15 and <48hours in 3.8%, n=7). Timing to CE was not significantly different between groups (p=0.31). However in MW timing of CE was associated with higher DY (p=0.002) and TY (0.024). In PMW there timing to CE was not associated with higher DY (p=0.23) nor TY (p=0.96).*"

**3) In Table 1 the authors should indicate the significant differences between two groups, and the authors should discuss the effect of these differences on the outcome of this study.**

In table 1 it was added the statistical differences concerning the two groups in study, clarifying the p value for each variable.

The authors also added the following considerations to the discussion: “The fact that MW had a higher rate of comorbidities and consumption of anticoagulants, antiplatelet and NSAIDs may partially explain the higher DY, TY and rebleeding rate.”

**4) The paper should include some typical images.**

It was added to the manuscript a typical CE image, capturing an examination in a MW with positive findings.

Thank you for receiving and reviewing our manuscript.

Kind regards,

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