

ANSWERING REVIEWERS

Editor, comment 1:

Please don't include the abbreviations in the title. The title should be no more than 12 words.

Response: *Title has been changed to "Layered enhancement at magnetic resonance enterography in inflammatory bowel disease: a meta-analysis" according to your request.*

Editor, comment 2

Our editorial policy states the overall similarity should be less than 30%, the overlapped section should be less than 5% in single papers, including author's own work. Similar sentences with other articles (highlighted in the 47704-CrossCheck Report), please rephrase these sentences.

Response: *Most of the paragraphs that you underlined has been changed using Word Track Changes tool (see "manuscript edited") and highlighted in yellow in the plain version (see "manuscript plain"). However, few sentences cannot be modified in order to be consistent with the structure of a metanalysis according to the PRISMA guidelines.*

Editor, comment 3

A short running title of no more than 6 words should be provided. It should state the topic of the paper.

Response: *We apologize for this shortcoming. The running title has been added.*

Editor, comment 4

In order to improve the quality of Systemic Review manuscripts, authors should download and complete the 'PRISMA 2009 Checklist' to ensure that the manuscript meets the requirements of the PRISMA 2009 Statement. Authors must state on the title page of the manuscript that the guidelines of the PRISMA 2009 Statement have been adopted (see below). Authors must upload the PDF version of the completed checklist to the system.

Response: *Thanks for pointing this out. Actually, we completed the PRISMA Checklist, not the 2009 version but the new 2018 version (PRISMA DTA, PMID:29362800), specific for metanalysis on diagnostic test accuracy studies. PDF version of the Prisma Checklist had been uploaded. The statement that underlines the adoption of PRISMA is reported in the text.*

Editor, comment 5

Please offer the audio core tip.

Response: *The audio core tip file (47704-Audio Core Tip.mp3) has been uploaded as required.*

Editor, comment 6

Please offer Article Highlights.

Response: *Article highlights have been provided within the revised version of the submitted manuscript.*

Editor, comment 7

Please check and confirm that there are no repeated references. Please add PubMed citation numbers (PMID NOT PMCID) and DOI citation to the reference list and list all authors. Please revise throughout.

Response: *References have been modified according to your guidelines, when necessary. In particular, repeated references (i.e. No. 15 and No. 21) have been deleted; PMID citation has been added to reference No. 21 and DOI citation has been added to references No. 4 and No. 21. PMCID citation has been removed from reference No. 19.*

Editor, comment 8

Please provide the decomposable figure of figures, whose parts are all movable and editable, organize them into a PowerPoint file, and submit as “Manuscript No. - Figures.ppt” on the system, we need to edit the words in the figures. All submitted figures, including the text contained within the figures, must be editable. Please provide the text in your figure(s) in text boxes.

Response: *Editable figures have been organized into a PowerPoint file (47704-Figures.ppt) and submitted as required.*

Editor, comment 9: Please explain all the abbreviations of each figure/table under each piece of figure/table legends

Response: *All the abbreviations of each figure and table have been defined in the relative legend.*

Editor, comment 9

Please put supplementary materials into another file named as “xxxxx-Supplementary material.pdf”

Response: *Supplementary file has been uploaded as a separate file (47704-Supplementary material.pdf) as required.*

Rev 1, comment 1:

Introduction: Paragraph 2: Explain how MRI alters management: eg differentiating active inflammation vs scarring

Response: *Thanks for your comment. We added a sentence describing how MRI can influence the management of patients with CD at the end of the second paragraph of the discussion. Two relevant citations have been added too (References No. 6 and 7).*

Combine paragraph 3 (“There are several MRI...”) and 4 (“However, among....”)

Response: *Thank you for this comment. We revised the introduction combining paragraph 3 and 4 as required.*

Methods/Results/Discussion The different gold standard for confirmation of active inflammation, ie the mixing of endoscopic and surgical patients is not addressed in the study at all. Not sure whether the 5 studies provide data on which patients had active inflammation confirmed by colonoscopy with biopsy vs by surgery. If so, then sub-analysis by each “gold standard” diagnostic method should be performed. Otherwise, this should at least be acknowledged in the discussion as a limitation of the study.

Response: *Thanks for pointing this out. In our meta-analysis, three included studies used either endoscopy with biopsy or surgery as a reference standard. Unfortunately, these studies did not provide enough data to perform such kind of sub-analysis, as Authors did not separate patients who underwent endoscopy from those who were surgically treated when reporting MRE and reference standard results. We addressed this limitation in our discussion, as required.*

Rev 2, comment 1:

You should tell us about the method of determination of CD activity in the last 5 included studies as an inclusion criterion in the appropriate section.

Response: *Thank you for your valuable comment. To be included in our meta-analysis, a study was expected to determine CD activity using endoscopy with biopsy and/or surgery as reference standard. We have specified this in the “Study Selection” paragraph of the Materials and Methods’ section.*

I agree that imaging could be helpful in a group of patients, but we should take care that clinical status of a patient with CD and paraclinical parameters are still considered as major factors for activity assessment and we do not always need imaging for start of therapy. You should consider this point in the discussion part where you are bolding the significance of MRE.

Response: *Thanks for pointing this out. We agree that there are particular conditions in which MRI doesn’t play a relevant role and we know the importance of clinical evaluation. We added a sentence in the discussion to underline what you suggested.*

Rev 3, comment 1:

It is well written manuscript. I have additional recommendations.

Response: *We thank this reviewer for the positive comments on our paper.*