

We thank the editors and the reviewers for considering our manuscript and advising changes to further improve it. We have incorporated all the changes as suggested by the reviewers. We hope, you will find it appropriate for publication now. However, we will be happy to make any further changes you may suggest.

Reviewer's comments	Authors reply	Changes made
In this paper, the letter proposed the widely concerned scoring problems in the clinical process of acute pancreatitis and explained the different scoring problems. At the same time, the author cites the articles published in the past to explain, but there is still a lack of certain innovation.	This was just a letter to the editor regarding a recently published paper which we wanted to compare with our study published more than a decade ago. We did not wish to add any data but wanted to highlight the lack of ideal score to predict outcome in patients with acute pancreatitis. SOFA score seems to be good predictor of mortality and severity and as it is easy to calculate and is widely accepted. In addition, its accuracy does not seem to have diminished over the period of time. We have added the utility of SOFA score in different patient populations and we hope our letter has become more clinically relevant and serve the purpose of helping our readers.	Changes made
The author should further introduce whether SOFA can also be used in other diseases to highlight the extensive role of SOFA in clinical practice. Overall, I think this is a worthy study that has important implications. The manuscript can be accepted and published in World Journal of Critical Care Medicine after minor revision.	Necessary text added	Advantages of SOFA score added
At line 36 "Scoring systems are" the abbreviation "SS" may here be explained, if it refers to "scoring systems" and is deemed to be necessary.	Changes made	Abbreviation explained