

Dear Editor,

Thank you for considering our manuscript for revision. We thank the reviewers for their valuable comments which allowed us to improve the paper substantially. Below we reply to each of the reviewers.

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: The manuscript summarizes the single-center experience in liver transplantation due to PSC. The topic is not new, but the differences between the Brazilian cohort and other populations deserve attention. It is impossible to know from the abstract how many patients underwent transplantation due to PSC. The authors should take into account that many readers base their interest in the text on the initial reading of the abstract. After reading the abstract itself, we do not know the size of the group described. It is not known whether 1.6% apply to PSC patients only or all transplants carried out at the center. I would suggest shortening the description of statistical methods, which do not have to be described in such detail in the abstract and replace them with a more accurate description of the results. The key words reflect the focus of the manuscript. The manuscript adequately describes the background and methods. Statistical methods are chosen correctly for this type of study however sample size is relatively small. It would be advisable for the authors to address the strengths and limitations of the study. The manuscript contains 1 figure of sufficient quality. Consideration may be given to adding a table of patient baseline characteristics. References are properly chosen and there are no self-citations. The manuscript would require linguistic correction due to minor errors (e.g. “most common” instead of “the most common”, capital letter instead of lowercase in the middle of a sentence, etc.) or phrases needing stylistic improvement (e.g. „...indicate that this may be an indicator...”). I think the authors meant inflammation, not inflation, in the first sentence of the introduction.

Reply: Thank you for your valuable comments. The paper has been revised and the writing polished by another translator. In this study we included all patients submitted to LTx for PSC at our institution within the study period, corresponding to 1.6% of 2113 transplants. We have attached tables showing clinical and epidemiological data for our sample of patients, along with information on treatment, complications, etc.

Reviewer #2:

Scientific Quality: Grade D (Fair)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Major revision

Specific Comments to Authors: Review - 85308: The paper retrospective cohort observational study of the experiences and approach of the Brazilian transplant center in the transplantation of PSC patients. The work needs to be significantly supplemented with a description of the treatment approach and the optimal time of patient registration on the list, the method of

prioritization on the list and the monitoring of the risk of cholangiocellular carcinoma. Equally in the post-transplantation period, the approach to monitoring the risk of complications, the recurrence of the baseline disease and the approach to immunosuppression. I would also like to refer to the approach to the treatment of inflammatory bowel disease in these patients in the pre- and post-transplant period. In doing so, please comment on the approach in Brazil and review the experiences of other relevant transplant societies. The title, abstract, manuscript organization, discussion, figures and references are appropriate. Language requires significant polishing to achieve precision, clarity and grammatical correctness.

Reply: Thank you for your valuable comments. As suggested, we have expanded the description of the approach, follow-up time, transplant prioritization methods, treatments administered, and occurrence of complications (see attached tables). Examining the patients' records, we concluded that the risk of cholangiocarcinoma was not consistently screened for by the health professionals, leading to potential underreporting. The English writing was carefully revised and polished.