Reviewer #1:

1- In patients and methods: - the authors mentioned that none of the patients fulfilled the Rome criteria. How did you diagnose FHB in the studied patients? -the authors mentioned they used a questionnaire to assess the typical and atypical reflux symptoms but they didn't specify which questionnaire was used and the results of the questionnaire was were not available in the results section

<mark>Answer:</mark>

Thank you so much for your questions. All our patients with FHB fulfilled the current Rome IV criteria.

This classification system also defines a category, named 'reflux hypersensitivity'; and we included that as well, but none of the studied patients could be diagnosed with this disease.

Please, find the questionnaire attached.

2- table one the terms DE all, DE only , PD All and PD only are not clear please clarify what do you mean with these terms and include all the abbreviations as footnote below the table to be more easily understood

<mark>Answer:</mark>

Thank you so much for your suggestion and comment.

'GERD': gastroesophageal reflux disease;

'FHB': functional heartburn;

'BMI': body mass index;

'DMS': DeMeester score;

'PD': periodontal disease;

'DE': dental erosion;

'DE all' means that all the patients who had dental erosion. Some of these patients have associated periodontal disease (PD) as well.

'DE only' means that such patients have only dental erosion and have not periodontal disease.

'PD all' means that all the patients who had periodontal disease. Some of these patients have associated dental erosion (DE) as well.

'PD only' means that such patients have only periodontal disease and have not dental erosion.

'SD': standard deviation;

'NS': not significant.

The footnote of the table is corrected according to the reviewer's comment.

3- in table two plaques index was not mentioned in the method please explain how did you calculate it

<mark>Answer:</mark>

Thank you so much for your comment. The plaque index was calculated by percentage of plaque area in relation to total area ($\frac{number\ of\ sites\ with\ plaque}{number\ of\ sites\ evaluated} \times 100$).

We added this phrase to the appropriate part of the Patients and methods section.

4- in results section: authors mentioned that 15 patients 22.7% of GERD patients had no signs of esophagitis please mention how did you diagnose these patients as GERD

<mark>Answer:</mark>

Thank you so much for your question. All the enrolled patients (including the endoscopy negative subjects) had multichannel, intraesophageal pH-impedance monitoring, and the acid exposure time was used to determine the presence of GERD according to the Lyon consensus.

Reviewer #2:

1- Firstly, this study explored whether the dental evaluation of heartburn patients can help differentiate GERD from FHB, so it may be better to add heartburn, differential diagnosis to the keywords.

<mark>Answer:</mark>
First of all, we would like to thank you for the great, short, and brief summary of our work, as well as your suggestions.

Thank you so much for your comment, keywords are corrected based on it.

2- Secondly, in the introduction, the manuscript may not adequately describe the status and significance of the research.

<mark>Answer:</mark>
Thank you so much for your comment.
We added some interesting points from your summary and other own points to describe the significance of the research in the Introduction section.

3 - Thirdly, The meanings represented by the horizontal and vertical axes of the two graphs describing the average impedance value are not indicated.

<mark>Answer:</mark>
Thank you so much for your remark and comment.
The 'Distances from the LES (cm)' and 'Mean impedance values (Ω)' were added to the axes on the graphs. The graphs are corrected based on the comment.

4 - Lastly, The future direction of this research and the related research to be carried out by the author in the next step can be further explained.

<mark>Answer:</mark>
Thank you so much for your interesting question about the future plans.
On the one hand, our aim is to expand the study multicentrally in the direction of patients with heartburn presenting in primary care, and thereby reach a larger number of cases.

On the other hand, this would probably also enable the inclusion of patients with reflux hypersensitivity, which is defined as a special borderline area between GERD and FHB in the Rome IV criteria system, which may help to decide whether this group of patients is more similar to patients GERD or FHB based on the oral status.