Response to Reviewers:

The study is devoted to the actual problem of screening and identification of new genetic markers of celiac disease in patients with type 1 diabetes. The study, although having some methodological flaws, provides valuable information to the field. The manuscript needs some major and minor revisions.

 1. In my opinion, celiac disease autoimmunity (CDA) instead of celiac disease (CD) would be a more appropriate term in the title, since diagnosis of CD was not verified in most cases. The same way, CDA instead of CD should be indicated in the captions of Table 3 and Table 4.

Response: We agree and have changed the title and captions for the Tables as suggested.

 2. Race and ethnicity of study participants should be reported.

Response: This is now reported in Table 1.

3. How was the diagnosis of type 1 diabetes verified?

Response: The diagnosis is self-reported however samples were collected at a conference for children with type 1 diabetes on insulin treatment and their family members. In order for inclusion in the study the subject must have T1D on insulin treatment or have a family member who meets that criteria.

4. Tables 1 and 2. The results of statistical comparisons should be given.

Response: Statistical comparisons were not given in Table 1 and instead presented in the univariate analyses in Table 3 and 4 where they are properly corrected for correlation due to family members. For that reason we ask that you refer to Table 3 and 4 for those values.

 5. Among subjects with diabetes, CDA was revealed in 22 cases only. Do authors consider the results of genetic comparisons are valid and representative in this situation? Was the sample size calculated prior to the study?

Response: We agree that the sample size of patients with T1D and CDA may be considered small however our findings that 7.3% of the T1D population had CDA is in agreement with previously published work. Therefore, our number, even if relatively small is appropriate for the analysis applied in the study.

6. In discussion section the novelty of research should be defined clearly.

Response: We have highlighted the novelty in the discussion.

7. The prevalence of gastrointestinal symptoms was lower in a group of diabetic subjects with CDA as compared to antibody-negative patients. How can authors explain this?

Response: We have added possible explanations for this in Lines 246-258

 8. The use of abbreviations must be brought into the system

Response: All abbreviations have been defined.

.9. References should be formatted according to the standards of the journal. Ref. 32 is incomplete.

Response: references have been updated and 32 (which is now reference 34) has been completed.

Reviewer 2

1. This is a good study. However, it requires minor modifications e.g. mismatch between HLA typing mentioned in text and table.

Response: Thank you this has been corrected