

Reviewer Report:

Reviewer #1:

1. There are minor corrections of writing in the English language - such as "first" on line 4 of page 3.

Reply: Writing errors are minimized in the revised manuscript and a professional English language editing company will polish the manuscript further to meet the publication requirement (Grade A).

2. Some aspects of the methods should be further explained, such as what is the exact meaning of prolonged hypotension of the donors, and what is the precise meaning of continuously in the fifth selection criteria.

Reply: The definitions of extreme marginal allografts have been described in detail in the revised manuscript.

3. In the results section, it is stated that 27,1% and 15% of EAD were caused by LFSS and SFSS, respectively. What diagnostic criteria were used to make sure that was the cause of EAD?

Reply: The definitions of EAD have been described in detail in the revised manuscript. The diagnosis of EAD relies not only on the criteria but also on clinical symptoms.

4. In some cases, receptors with large ascites can accommodate larger liver grafts than estimated based on the size of their native liver - how is the presence of significant ascites accounted for in this model for donor-receptor size compatibility?

Reply: Our study did not exclude patients with large amounts of ascites and found that ascites was not a risk factor for IBL and EAD. Our research object was the exact TLV rather than the abdominal volume, and the presence of ascites in our study only affected the TLV calculated by the formula method.

Reviewer #2:

1. I would suggest omitting abbreviations in the title and explaining abbreviations

once again in the discussion part.

Reply: The abbreviation in the title has been replaced.

2. Some abbreviations are not explained in the text e.g., DILD, ALD, etc.

Reply: The abbreviations for alcoholic liver disease and drug-induced liver failure were explained in section 'Recipients and Donors Demographics'.

3. What is the Changzheng formula? It should be explained in the text for those not familiar with it.

Reply: The definitions of extreme marginal allografts have been described in detail in the revised manuscript.

4. Some punctuation errors for example there should be a comma before sTLVi "end-stage liver disease score, sTLVi" in the abstract. Some sentences need to be rewritten in the Results Section for better understanding for example "Therefore, eTLVi model was calculated by dividing formula donor eTLV by IQQA-3D recipient eTLV and selected as an estimation model in the study". "On univariate logistic regression, we found that sTLVi was at increased risk of massive IBL" "Distribution of donor characteristics was similar except MD-FR combination"

Reply: The grammar errors mentioned above have been corrected and a professional English language editing company will polish the manuscript further to meet the publication requirement (Grade A).