

Dear Editor and reviewers,

Aug 5th 2015

Thank you very much for your reviews and valuable comments. The manuscript has been revised according to your suggestions, with the revisions labeled in red in the revised manuscript.

The point to point responses are listed below.

Sincerely,

Shu-Chen Wei

Reviewer 1.

1. Correlations between mucosal appearance, histologic features and calprotectin levels should be studied in patients with UC and Crohn's disease separately.

Fecal calprotectin has been widely used in IBD patients monitoring in the Western countries for years. Costa et al (Gut. 2005) suggested fC is a stronger predictive marker of relapse in UC than in CD. Valle García et al. (J Crohns Colitis. 2010) commented the predictive value is greater in UC and CD with colon involvement, compared with ileal CD. However, the effect of fecal calprotectin is less known in the Asian area.

Therefore, we performed this head-to-head comparison for CD and UC. In agreement with the previous studies, our result showed that when comparing fC level with endoscopic activity index in CD and UC, the correlation was also higher in UC than in CD. This result may help us evaluate the utility of fecal calprotectin in predicting endoscopic activity in patients with inflammatory bowel disease. We believe this is also an important conclusion for the clinical practice, therefore, we keep the results and discussion of using fecal calprotectin in CD.

Reviewer 2.

1. Major suggestion to drop the first paragraph in the discussion section and started with a clear statement of the core results and their significance.

We have deleted the first paragraph in the discussion section according to your suggestion. We emphasized the core result of the concentration of fC in Asian IBD patients, as in the revised manuscript (page 12, Discussion, paragraph 1).

2. Secondly, there appears to be a reduced number of references; the Authors should expand on the comparative value of fecal calprotectin in the discussion section, also as related to the results of recently published data.

We have added recent studies about comparative value of fecal calprotectin in the discussion section and increased number of references, such as Theede et al.(Clin Gastroenterol Hepatol. 2015), and D'Haens et al (Inflamm Bowel Dis. 2012), also expanded the discussion in the revised manuscript (page 12-14).