

Dear editors and reviewers:

We are truly grateful to yours and other reviewers' critical comments and thoughtful suggestions. Based on these comments and suggestions, we have made careful modifications on the original manuscript. All changes made to the text are in light color. In addition, we have re-consulted native English speakers for paper revision before the submission this time. We hope the new manuscript will meet your magazine's standard. Below you will find our point-by-point responses to the reviewers' comments/ questions:

***Reviewed by 00069230***

Comments:

This is an elegant review that aims to evaluate which are the early complications that arise in patients with acute pancreatitis after initial intervention in China. The authors establish the relevance of clinical laboratory indicators to assess the severity of the disease and as such identify those patients prone to postoperative complications.

Answer: Thank you.

***Reviewed by 00070310***

Comments:

This paper shows early complications of interventions for acute pancreatitis. This manuscript is interesting and most parts of the

paper are clearly detailed. However, it will require some changes before it can be accepted for publication. 1, Please show the cause of death associated with acute pancreatitis. In addition, the relation between death and early complications. 2, Please mention the treatment for acute pancreatitis considering from the findings of this manuscript.

Answers: 1. Among the 53 death cases, 19 (36%) patients were dead because of multiple organ failure, 5 (9%) of them were died of hemorrhagic shock and other 29 (55%) patients were died of septic shock.

As for the relation between death and early complications, we considered that the cause of death in acute pancreatitis patients were various. Most reasons of death were multiple organ failures, hemorrhagic shock and infectious shock. Early complications including intro-abdominal bleeding, colonic fistula and progressive infection might cause another intervention or open surgery but patients might not die of complications. In our study, patients who had colonic fistula would recovery from the temporary ileostomy. So we considered that the analysis of death and early complications was not rational.

2. Most treatments for acute pancreatitis were showed in the management of protocol and data collection in the "MATERIALS AND

METHODS” part. Patients underwent the open surgery when percutaneous catheter drainage and minimally invasive necrosectomy were failed and when patients had manifestations of infection or suspicious infection.

***Reviewed by 02441672***

Comments:

This study provides a very good review regarding early postoperative complications of acute pancreatitis, provides relevant information about the clinical history of the disease in China and highlights the importance of using clinical laboratory indicators in the possible prevention of complications.

Answer: Thank you

Sincerely yours,

Zhaoda Zhang