

Dear Editors and Reviewers,

Thank you very much for your time and effort in reviewing the article entitled **“Outcome analysis of management of liver trauma: a 10-year experience at a trauma center”**. The comments are very constructive and I sincerely hope that after reading this revision, you may consider acceptance of the article.

I would like to respond to the comments as follows:

#1) The introduction and the aim of the study have been revised.

#2) The data were retrieved by a dedicated trauma nurse coordinator and then screened and reviewed by the authors. This is added to the manuscript. The whole subsection ‘Statistical analysis’ is rewritten as follows:

“At the Department of Surgery, The University of Hong Kong, we have our own statistical staff. The biostatistics in this study was performed by our own statistical staff. The computer software SPSS, version 21.0, from IBM SPSS Statistics was used for statistical analyses. Continuous variables were compared by the Mann-Whitney U test and expressed as median with interquartile range. Student's t-test and Pearson’s chi-squared test were employed. 30-day survival was measured. The Kaplan-Meier method was used for survival estimation and the log-rank test was used for survival comparison. Multivariate analysis was performed to identify the risks for mortality. P values <0.05 were considered statistically significant.”

#3) The outcomes of OM and NOM are shown in the table. Additional data are added to the table, including blood loss, blood transfusion, packed cells transfused, and radiological intervention. We agree that subgroup analysis is not favorable because of the small sample size. However, given that the condition is not very common and it is difficult to conduct trauma study in a prospective setting, the subgroup analysis plays its role.

#4) Weaknesses of this study are added to the discussion.

Thank you very much for your time and consideration. I look forward to hearing

from you soon.

With best regards,

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