

Lian-Sheng Ma,
President and Company Editor-in-Chief
Baishideng Publishing Group Inc

Jing Yu,
Science Editor, Editorial Office

We appreciate the revision of our work, enclosed please find the revised version of the manuscript entitled, **CLINICAL SCENARIOS FOR THE USE OF S100 β AS A MARKER OF HEPATIC ENCEPHALOPATHY**, for its publication in WORLD JOURNAL OF GASTROENTEROLOGY.

The revised version of the manuscript was approved by all Authors. Below please find a point-by-point response to the reviewer's comments. The changes made can be found highlighted in yellow in the updated manuscript.

We really appreciate the consideration of our work in your journal.
Sincerely,

Aldo Torre, MD, MSc

Jing Yu, Science Editor:

-We appreciate the revision of our manuscript. The changes made according to the suggestions are highlighted in yellow in the revised manuscript.
-The title was changed to make it short
-The full name was added as in the copyright
-The postal codes are provided
-The statements were added
-The reference numbers were formatted
-The tables were moved to the end of the manuscript
-The highlighted comments are provided
-The references were edited

Reviewer 00051758

- 1) The authors need to Discuss their findings in relation to the 2014 EASL-AASLD guidelines, i.e. minimal versus covert HE.
- 2) If S100-beta is metabolized in the kidney would any degree of functional or organic renal dysfunction affect its levels? Did any of the patients have any degree of renal dysfunction?
- 3) Exactly as in their own PHES validation study (reference 15), patients qualified as having MHE were older, less educated and considerably more hyperammonaemic than both other groups of patients. Can we trust the overall classification of neuropsychiatric status? PHES averages need to be provided and discussed, and in Table 2 minimal needs to be split from overt.
- 4) It would be very interesting to present/discuss patients with discordant results (for example, low ammonia, low S100-beta and abnormal PHES).

- The authors thank the reviewer for its appropriate and useful comments and suggestions
- The findings were changed according to EASL-AASLD guidelines to covert HE.
- None of the patients presented renal dysfunction; the serum values of creatinine for each group were added to Table 1, to illustrate the renal status.
- The classification of the neuropsychiatric status according to PHES is standardized by the patient's age and years of educations, this means that higher or lower values do not affect the final result as this is taken into consideration for the calculation of the overall result.
- In Table 2 the results from minimal were split from overt HE.

Reviewer 03536035

Interesting study where the group with HE, MHE, cirrhosis and control were compared. Needs monitor polishing of language.

-The authors thank the reviewer for the comments and suggestions; the manuscript was fully revised for language errors by two native English-speaking persons.

Reviewer 03564496

This manuscript mainly described the association between serum concentrations of S100 β and the presence of low-grade HE in patients with liver cirrhosis. And the result suggested that S100 β could help in the correct characterization of incipient stages of HE. The content was interesting and meaningful, and it could supply the foundation for the clinical research in the future. Therefore, in my opinion, it reaches the standard of publication.

-The authors thank the comments from the reviewer.