

All question has been addressed.

Reviewer 1. No questions to answer

Reviewer 2.

Q1. A section on why this condition is not being reported from all over India would be interesting.

Ans: HPA is a disease prevalent in endemic areas of world. Large series of patients have been published from several states of India including Kashmir, Kolkata and Assam and several other endemic countries namely Saudi Arabia, Syria, Philippines and South Africa. However, HPA has not been reported from several regions of India. This is related to density of worm load in the community. HPA is restricted to population with high endemicity with high worm load in the population. This has been stated and figure 5 included to explain pathogenesis of HPA in endemic areas and role of worm load.

Q2. Thousands of Gallbladder surgeries are taking place in India daily. It would be interesting to the hands-on experience of surgeons on hepatobiliary ascariasis in India.

Ans: Surgeons of this region had encountered worms in the bile ducts rarely in their entire surgical practice and impact of this disease in the community had never been highlighted. The organism is highly motile and can move in and out of ducts over short periods and was not expected to be present in the ducts at surgery. Statement has been included as to the reason why surgeons did not encounter HPA during surgeries in the past.

Q3. Viewpoint of Radiologists from other parts of India on the utility of ultrasound in this condition.

Ans: Ultrasonography chapter has been expanded to include view of radiologists from other parts of India and other countries.

Q4. A flowchart on which patients to undergo which tests in what sequence to establish ascariasis in patients with what complaints would go a long way in helping other readers.

Ans: Flow chart included as Fig 11.