Reviewer 00068574

The authors studied the association between seven IL23R SNPs and clinical features of UC in Hungarian population. They found that 4 out of 7 SNPs had a significant influence on the clinical picture of UC. The study is well conducted, the results are interesting but, as the number of patients is not very high, the data should be validated in another cohort in a future study.

1. Major concern: - page 4, summary section "results": It is reported that "patients with rs10489629 SNP had a lower risk for weight loss" while in the section "results" page 11, lines 15-16, it is also reported that carriers of this SNP have a higher risk for an extended disease .Why this last observation doesn't appear in the summary?

Answer: We agree with the reviewer's comment, and added this to the „Results" section of the „Abstract".

2. How can the authors explain the fact that rs10489629 SNP can be both beneficial and harmful. This point should be discuss.

Answer: The reason for the protective and harming character of rs10489629 remains unclear. A possible connection could be a more frequent need for steroids because of the greater extension of the disease along the colon, leading to a lower risk for weight loss. This study did investigated the need for corticosteroids but not the administration frequency. No significant higher need for steroids could been shown.

3. Minor points - page 11, line 16: please correct the typo.

Answer: Corrected

4. Discussion, page 13, lines 9-11. Except for rs 1004829 SNP, Glas et al found an association between IL23R variants reported in Table 2 and UC. Similarly, Duerr et al found an association for 2 out of 4 variants in non-Jewish UC patients. Therefore the data of the present study are not in contrast with the results of Duerr and Glas. This point can be specified in the discussion.

Answer: Duerr et al. and Glas et al. did find an association between IL23R and inflammatory bowel diseases but no influence on the phenotype of ulcerative colitis.