Answers to queries of the Reviewers

Reviewer 1

1. The Tables 2a -2d and the Table-3 have been corrected and now correspond with the text.
2. There was an error in representation of Table 2c and it has been corrected, thus MIC of isolate 989 to auranofin is seen to be 1µM. In table 2a, MIC of 980 for auranofin was considered to be 3 µM, since two out of three wells gave a '+' score for a concentration of 3µM Auranofin.
3. The decimal point in the P value, in figure 2c, has been rectified. The P value now matches with the text.
4. The gel images have been represented with molecular markers and controls as per the instruction of the reviewer
5. Figure 4 has been removed from the manuscript and the corresponding changes made in the text.
6. Obtaining xenic cultures of *E.histolytica* from patient samples was a labour intensive process. We had found in our earlier study (Ref 17), that isolates from New Delhi showed a greater tolerance to metronidazole, this prompted us to isolate few more xenic strains and look into drug tolerance of these to metronidazole and the new drug auranofin as well. We also performed a pilot study on cultures of clinical isolates of *E.histolytica* available in our laboratory to assess their MICs for auranofin and metronidazole. Please refer Table -3.

Reviewer 2.

From a basic research point of view, with the available clinical isolates of *E.histolytica* from New Delhi, we can further study the mechanism of action of the new drug auranofin.

From the clinical point of view: The MICs of the two drugs auranofin and metronidazole will assess the sensitivity of the various isolates to the drugs. The antioxidant enzymes thioredoxin reductase and peroxiredoxin levels in the isolate

after treatment with the auranofin and metronidazole can help assess the effectiveness of the antiamoebic drugs.