

Point by point response:

We want to first thank the reviewers for their valuable comments and corrections which greatly improved the quality of our manuscript.

Reviewer 1:

Thanks for giving an opportunity to share this wonderful case. As you know, colon ulcer is very difficult to reach precise diagnosis. My major concern is how to differentiate with CMV colitis in this KT patient. PCR is not enough to exclude CMV colitis.

Indeed, CMV colitis may occur in renal transplant recipients and should be clearly identified or ruled out. In our patient, at the time of endoscopically active colitis, PCR analyses in the blood, but also in colonic biopsies were negative for CMV DNA. Even though CMV biopsy PCR does not seem to have sufficient specificity, it is the most sensitive test to make a diagnosis of CMV colitis. Moreover, typical histological signs of CMV colitis such as owl's eye inclusion bodies were not detectable despite careful analysis by our specialized pathologist. We thus believe that together these findings ruled out the diagnosis of CMV colitis in our patient.

We modified the manuscript accordingly in the CASE REPORT and DISCUSSION sections

Minor comments are some typo and miss hyphon. please correct them.

We modified the manuscript accordingly, and we submitted the manuscript for a new language editing by an English native academic Physician (Dr. Natalie Funakoshi).

Reviewer 2:

The World Journal of Gastroenterology, Manuscript NO: 35624 Title: Stricturing Crohn's disease like colitis in a patient treated with belatacept By Dr. Anne Bozon, and colleagues. In this case report, the authors describe development of severe stricturing Crohn's disease like colitis in a patient with kidney allograft following treatment with belatacept a recombinant CTLA-4-Ig fusion protein. The report has high novelty, clinically important information, which is relevant in therapeutic settings. Notably, the authors have been very mindful of relevant ethical issues, all clearly addressed. This report should have a very broad appeal, gastroenterology, inflammatory bowel diseases and beyond. May I mention that the impact of your report should significantly benefit from minor language editing throughout by a native, but someone with adequate academic experience.

We submitted the manuscript for a new language editing by an English native academic Physician (Dr. Natalie Funakoshi) and modified the manuscript accordingly.

All modifications made on the original version of the manuscript appear in red in the new version of the manuscript.