

Changes according to Editor's comments:

- In order to respect the maximum of 12 words, we changed the title as follows: "Small bowel capsule endoscopy and treat-to-target in Crohn's disease: A systematic review".
- We added the postcode in our affiliation.
- We modified the abstract according to the author guidelines provided for systematic reviews.
- We removed the abbreviation CECDAI from the key-words.
- We rephrased or removed most of the sentences that had been highlighted in the Cross-check report.

Point-by-point response to Reviewers

Reviewer #1:

This work comprises a systematic review of the role of CE has been applied in relation to assessment of mucosal healing in CD

SPECIFIC COMMENTS

1. The main focus of the MS was upon MH in CD. The first two parts of the search results did not relate to this focus. It would be more appropriate for the results to focus on the impact of CE upon MH after therapeutic intervention and perhaps on recurrence after resection. The first parts (tables 1 and 2) are not focused on these objectives.

- **Partially agree. The focus of this systematic review was the impact of SBCE on a treat-to-target strategy in patients with Crohn's disease.**
- **The first part about SBCE indexes is definitely not focused on the treat-to-target strategy. Therefore, we put the table describing the studies assessing the two indexes as Supplementary Table 2 instead of Table 1. However, it seems important to keep these data in the manuscript as both scores are used in most of the studies included in the other sections of the review. The description of the indexes and existing data about their correlation with clinico-biological activity make the rest of the manuscript easier to understand.**
- **The second part of the results focused on disease reclassification and prognosis. Even though this section does not assess mucosal healing and is not related to patients' monitoring under treatment or after surgery, it is an integral part of the treat-to-target paradigm in patients with Crohn's disease. Indeed, in the treat-to-target strategy, treatment is initially based on patient's risk stratification according to prognostic factors. The visualization of SB lesions by SBCE at the time of diagnosis or later may have a therapeutic impact and is therefore an integral part of the treat-to-target strategy.**

2. The INTRODUCTION is long. Some of the text here would be more appropriate in the DISCUSSION.

- **Fully agree. We shortened the introduction (2 pages instead of 3 initially) as some elements were redundant with the discussion.**

3. The TITLE would read better as "Impact of small bowel capsule...."
 - **We changed the title as follows: "Small bowel capsule endoscopy and treat-to-target in Crohn's disease: A systematic review".**
4. In contrast, line 3 of the ABSTRACT would read better as "the SB"
 - **Agree. We made the change in the abstract.**
5. In the aim of the ABSTRACT, that should be this
 - **We modified the aim of the abstract according to the author guidelines provided for systematic reviews, as follows: "To investigate the impact of SBCE in a treat-to-target strategy in patients with CD."**
6. in regards the patterns of disease location (and with view of Paris vs Montreal) it would be appropriate to document that disease proximal to the ileum is present in at least 50% (if not >60%) of children. Much higher rates than those quotes here.
 - **Agree. We added these data to the discussion, as follows: "Clarity in disease distribution is therefore crucial, and pediatricians have already modified and modernized the Montreal classification, all the more so as upper gastrointestinal involvement is much more frequent in children than in adults (30-80% vs. 10-15%)."**
7. the spelling of the term aphthoid is incorrect in the text.
 - **Agree. We made the change in the main text and in the legend of Figure 1.**
8. There are a number of minor errors of grammar or English language word usage.
 - **Our article has since been reviewed by a Native English speaker.**

Reviewer #2:

The manuscript entitled " Impact of the small bowel capsule endoscopy in a treat-to-target strategy in patients with Crohn's disease: A systematic review " reviewed. Title is suitable and appropriate.

- **We thank Reviewer #2 for her/his comment.**

In abstract data, method and results summarized appropriate.

- **We thank Reviewer #2 for her/his comment.**

Some keywords are not exist in the abstract and it is better to use key words which are exist in the abstract part.

- **We removed the key-words that were not included in the abstract and replaced them by relevant words from the abstract.**

Background is appropriate.

- **We thank Reviewer #2 for her/his comment.**

Methods described well but Authors should include studies in google scholar and scopus too. Why haven't mentioned to these motor searches?

- **We wanted to limit our literature search to the most clinically relevant studies, which are mostly published in journals that are indexed in PubMed. We agree that we may have missed some interesting studies, but we had already included a total of 47 articles that gave us an appropriate overview of the published studies assessing the use of SBCE during treat-to-target in patients with CD.**

Reviewer #3:

This is a thorough review of the literature as it pertains to this important modality in prognosticating small bowel Crohn's. The charts and visuals are excellent. Although, this doesn't include histologic remission, it's a great review looking at endoscopic remission. Well done.

- **We thank Reviewer #3 for her/his comment.**
- **Regarding histologic remission, in contrast with ulcerative colitis, it has not proved to be a valuable therapeutic target to reach in patients with Crohn's disease. Moreover, there is no biopsy capability with small bowel capsule endoscopy.**