

Jia-Ping Yan
Science Editor, Editorial Office
Baishideng Publishing Group, Inc.

May 20, 2019

Dear Jia-Ping Yan,

Thank you for your recent review and continued consideration of the manuscript (“Evaluation of Clinical Outcomes in an Interdisciplinary Abdominal Pain Clinic (APC): A Retrospective, Exploratory Review”) for the *World Journal of Gastroenterology*. The feedback from you and the reviewers was extremely helpful and, I believe, has resulted in a more sound and complete work product. Specific changes made in response to your and reviewers’ feedback have been made within the edited manuscript and highlighted via “Track Changes;” these changes, where relevant, are further explained below.

For simplicity, I have categorized our bulleted responses to reviewers’ comments Reviewer #1 and Reviewer #2, with specific reference to manuscript page and line number where possible.

Reviewer #1

This manuscript focuses on a topic of, abdominal pain associated with pediatric functional gastrointestinal disorders (FGIDs) with interdisciplinary treatment. This is interesting.

1. The major concern is the small number of study participants, only fifty-three patients (13.7%) were seen for an initial evaluation (IE) only.
 - The total number of patients whose records were reviewed was 392 between August 1, 2013 and June 15, 2016. Of these, 53 patients (13.7%) were seen for an initial evaluation only and no subsequent follow ups. Because our primary study aim was to evaluate clinical outcomes for pediatric patients with FGIDs, analyses necessitated at least one follow up data point. As such, all reported analyses presented in the proposed manuscript included 245 to 333 study participants (i.e., the total number for which follow up data on the various, unique study variables was available; these are summarized in Table 2). Because our data were collected naturalistically and not at predetermined time points (i.e., an observational study), the interpretation of “missing” data becomes complicated. In the event that patients do not attend scheduled follow up visits because they are well, “missing” data may, in fact, signal improvement that is unreported or undetected. As such, we argue that our results actually may be a conservative estimate of our patients’ improvement, though additional data would be needed to confirm this claim.

Reviewer #2

This paper looks written well basically. I found several points which may be considered for improvement.

2. P2, line 10: abbreviated description (CPAQ-A) appeared without spell-out form though its first appearance. Please attach its spell-out form here.

- We have made this correction and added the full name of the CPAQ-A within the text, P7, Line 13-14.
3. P7, line 1: p value of parent-reported PedsQL looks discordant between in the body (p=.006 at P7 line 1) and table 4 (p=.013). Please make sure about this issue.
 - We appreciate this reviewer pointing out this discrepancy. The value within Table 4 is correct. The manuscript has been updated accordingly, P11, Line 26.
 4. Style of reference looks not unified. Please fix this point.
 - We have reviewed the formatting of all references and made changes, as needed. These are reflected within the included, edited document.

The revisions herein have been seen and approved of by all study authors. If you have any questions, or require additional materials from me, please feel free to contact me at the address listed below. I look forward to hearing back from you soon.

Sincerely,

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