

RESPONSE TO EDITORS AND REVIEWERS

Firstly, we would like to thank you all for your valuable time spent in reviewing this manuscript. We carefully read and take into consideration all the comments. We are grateful for the comments received because they were very constructive and helped us to improve the scientific quality of our manuscript. We have revised the manuscript according to reviewers' comments and suggestions. We hope that the revised manuscript meets the journal's standards and peer-reviewers' expectations and is acceptable for publication.

POINT-BY-POINT RESPONSES

REVIEWER #1

In this retrospective study, Tucia et al. compared the outcomes of early and late paracentesis for patients with cirrhosis. They recommended early paracentesis, if possible, to improve patient outcomes. 1. It was unclear in this study whether complications associated with cirrhosis including encephalopathy, hepato-renal syndrome, and infections were present prior to paracentesis or these complications developed after the paracentesis. If these complications were present prior to the paracentesis and were the obstacle to perform early paracentesis, it seems strange that these factors were analyzed mixed with post-paracentesis outcomes (mortality, re-admission) (Table 4). 2. A P value was assigned to each category (Table 1 and 3). For example, A P value of 0.43 is assigned for male gender (Table 1). What does it mean? This P value is not for male/female ratio?

RESPONSE TO REVIEWER #1

Thank you for your valuable comments.

1. We agree that it was not specifically written in the manuscript and the results could be easily interpreted. The purpose was to assess the complications that occurred after admission, during hospitalization. We added specific sentences in the manuscript (where was necessary) to clearly state this issue (sentences like "New-onset complications of cirrhosis, developed after admission, during the index hospitalization"). We have revised the manuscript to be clearly understood this issue because is of paramount importance.
2. We agree with this comment, it was an error typing. We corrected both tables (table 1 and table 3).

REVIEWER #2

Thank you for inviting me to review this article. It is an interesting article. However, whether there are other unrelated diseases such as heart disease between EP and DP groups should be further discussed. Secondly, I think the multivariate logistic regression in Table 4 is not appropriate. Otherwise it is very meaningful. Perhaps it could be published as an abstract.

RESPONSE TO REVIEWER #2

Thank you for your valuable comments.

Regarding the comment with other diseases, we excluded patients with other causes (see in the text at the section "*Exclusion criteria: patients with other etiologies of ascites (cancer, heart failure, tuberculosis)*"). Furthermore, other unrelated diseases were not present in our patients with cirrhosis. We agree with the comment that multivariate logistic regression in Table 4 is not appropriate and we thank you very much for this constructive remark (it was a misunderstanding between us and informatics) because Table 4 represents only the odds ratio calculation for each complication developed during hospitalization in both groups, so we changed the title and modified the table to better reflect this purpose. Also, we made corrections within the text to specify that we did not perform a logistic regression and that we calculated only the odds ratio and confidence intervals.

REVIEWER #3

*Thank you for the opportunity to review the manuscript titled, *Timing of paracentesis and outcomes in decompensated cirrhosis*. Data regarding the optimal time of paracentesis and outcomes among patients with cirrhosis and ascites are scarce. It's a very interesting topic. The viewpoint of this article is objective and clinically useful.*

RESPONSE TO REVIEWER #3

Thank you for your valuable comments.

SCIENCE EDITOR

Issues raised: (1) I found no "Author contribution" section. Please provide the author contributions; and (2) I found the authors did not write the "article highlight" section. Please write the "article highlights" section at the end of the main text.

RESPONSE TO SCIENCE EDITOR

Thank you for your valuable comments.

1. We have added the **Author contributions section** and corresponding author in the revised manuscript (in the Section Footnotes, after References).
2. We have added the **Article highlight** at the end of the revised manuscript.

RESPONSE TO EDITORIAL OFFICE DIRECTOR and COMPANY EDITOR-IN-CHIEF

Thank you for your valuable time spent in analyzing our manuscript.

4.6. Requirements for references

We have listed in the revised manuscript all authors and PMID and DOI number for each reference, except reference number 14 and 16 which don't have these details.