

## **Response to the reviewers (1)**

Manuscript:

p.3, paragraph 5, line 2: New sentence and reference with regard to prevalence of IBS.

p.3, paragraph 5, line 3: New sentence and reference with regard to quality of life.

p.4, paragraph 1, line 1-4: The criteria used for IBS diagnosis is given with a reference.

p.4, paragraph 2, line 2-4: The patients were on their own diet, not fasting, no supplementary fiber. As stated, abdominal X-rays were taken after 48 and 96 hours. The implications of the two techniques for measuring CTT is discussed on p.7 in paragraph 2.

p.5, Statistical analysis. The co-author is a biostatistician and has performed the analyses.

p.7, paragraph 3, line 3-5: Absence of difference in CTT between females and males is discussed.

p.8, paragraph 2, line 6: The difference in faecal load between female and male patients is stated. There are no other studies to compared with.

p.9, paragraph 2, line 4-7: The use of domperidone is discussed.

Some new references have been added. It should be noted that the literature concerning CTT and faecal load, especially in IBS-patients, is scarce. PMID and DOI are added.

With regard to the documents for Institutional Board Approval and Informed Consent these files are unfortunately lost, because I have had a breakdown of the hard disk, and it was not possible to recreate the content, as I have explained to you earlier.

The approval and conflict-of-interest statement are stated in the manuscript.

Dennis Raahave

## **Response to the reviewers (2)**

Manuscript:

p.3, paragraph 5: Changes are made to expand the Introduction. The literature with regard to the specific issue is scarce.

p.3, paragraph 5, line 2: New sentence and reference with regard to prevalence of IBS.

p.3, paragraph 5, line 3: New sentence and reference with regard to quality of life.

p.4, paragraph 1, line 1-4: The criteria used for IBS diagnosis is given with a reference. IBS-patients have not been sub-typed.

p.4, paragraph 2, line 2-4: The patients were on their own diet, not fasting, no supplementary fiber. As stated, abdominal X-rays were taken after 48 and 96 hours. The implications of the two techniques for measuring CTT is discussed on p.7 in paragraph 2.

p.5, Statistical analysis. The co-author is a biostatistician and has performed the analyses.

p.6, paragraph 2, line 1-4: Significant correlations were found between faecal load and CTT.

p.7, paragraph 3, line 3-5: Absence of difference in CTT between females and males is discussed.

p.8, paragraph 2, line 6: The difference in faecal load between female and male patients is stated. There are no other studies to compared with.

p.9, paragraph 2, line 4-7: The use of domperidone is discussed.

Some new references have been added. It should be noted that the literature concerning CTT and faecal load, especially in IBS-patients, is scarce. PMID and DOI are added.

With regard to linguistic editing, San Francisco Edit did it for publication in WJG.

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Dennis Raahave