

Editor Comments:

We are pleased to inform you that, after preview by the Editorial Office and peer review as well as CrossCheck and Google plagiarism detection, we believe that the academic quality, language quality, and ethics of your manuscript (Manuscript NO.: 70159, Observational Study) basically meet the publishing requirements of the World Journal of Clinical Cases. As such, we have made the preliminary decision that it is acceptable for publication after your appropriate revision. Upon our receipt of your revised manuscript, we will send it for re-review. We will then make a final decision on whether to accept the manuscript or not, based upon the reviewers' comments, the quality of the revised manuscript, and the relevant documents. Please follow the steps outlined below to revise your manuscript to meet the requirements for final acceptance and publication.

***Response: Thank you for giving us the opportunity to submit a revised manuscript. Thanks very much for your efforts for this article. We have finished the point-by-point response to the editorial offices and reviewer's comments and concerns. For more details see the revised manuscript.***

Reviewer reports:

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: The problematics of differential diagnosis remain critical for clinical approaches to autism. Therefore, formalizations of the diagnostic procedures must be able to remain open-minded and accompanied by a creative clinical approach, especially in the case of complex situations that are not soluble by means of conventional diagnostic tools. One possibility may lie in the deepening of the phenomenological approach to autism as an attempt to model the subjective phenomena of autistic subjects and thus operationalize elements that serve the diagnostic process.

***Response: Thanks very much for your suggestion. As you know, the prevalence of ASD increased dramatically in recent years. Early diagnoses of ASD play an important role in the intervention and rehabilitation. However, as the etiology of ASD is not clear, it is difficult to make a diagnosis based on biochemical indicators at present. The diagnosis of ASD was based mainly on a detailed developmental history, observed behavior, parents' report, and validated screening tools or criteria of the Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM-5). Therefore, validated assessment instruments may be the primary factor contributing to early diagnoses of ASD. Autism Diagnostic Interview-Revised (ADI-R) or Autism Diagnostic Observation Schedule (ADOS) is widely used abroad and is considered as one of the authoritative criteria for diagnosing Autism. However, there are few qualified physicians after receiving training in this examination method in China. In addition, the interview and scoring process is time-consuming, which is not suitable for the current clinical situation in our country. Therefore, we need a scale***

*that is relatively simple and easy to operate to quickly screen suspected autistic patients. Furthermore, the process for assessing autism in Chinese hospitals consists of three main parts. The first step is a preliminary self-report completed by parents. The most used scale is ABC. The second assessment was completed by a professional, such as CARS and ADI-R assessment in some places. Finally, the psychiatrist observed and interacted with the child in the clinic based on the checklist of ASD criteria of DSM-5. Only by combining the above three parts can the final decision be made. In addition, ABC is completed by a parent/caregiver or teacher. Parents tend to internalize social stigma against autistic children, which may be related to some degree of prejudice against mental illness in China. Therefore, most parents are reluctant to face the fact that their children might have ASD, which may bias the assessment of their children's symptoms. However, specialists will further evaluate these patients with CARS. The results of these scale assessments are only used as a reference. As you said, the deepening of the phenomenological approach to autism is an attempt to model the subjective phenomena of autistic subjects and thus operationalize elements that serve the diagnostic process. Due to the current situation of assessment of ASD in China, we aim to validate these two most used scales CARS and ABC, both of which is widely used in China.*

Editorial office's comments:

Science editor:

This study intends to compare the diagnostic efficacy of CARS and ABC by using a comparatively large sample of Chinese children. The design of the study is sound, the manuscript is generally well-written. The question raised by the reviewer should be addressed. Minor language editing is needed. The academic editor suggests the authors to consider change the title of the manuscript, making it more pertain to the contents of the manuscript.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade B (Very good)

***Response: Thanks very much for your suggestion. First, we have finished the response to the questions raised by the reviewer. Second, we have rechecked our manuscript and made corresponding corrections for these grammatical errors. Last, we have changed the title of this article to "Comparison of diagnostic validity of two autism rating scales for suspected autism in a large Chinese sample". Thanks very much for your efforts for this manuscript.***

Company editor-in-chief:

I recommend the manuscript to be published in the World Journal of Clinical Cases.

***Response: Thank you for giving us the opportunity for possible publication. We have carefully rechecked our article and made relevant changes. Thanks very much again for your comments on this study. Thanks very much again for your comments on this study.***