

Roma 21/06/2022

Dear Editorial Office Director,

Thank you for the opportunity to respond to your e-mailed message.

My collaborators and I are pleased that our manuscript, entitled “SARS-CoV-2 and the Pancreas. What do we know about acute pancreatitis in Covid-19 positive patients?”, has met the requirements for publication in the World Journal of Gastroenterology (Manuscript NO: 77743).

We have read the comments of the two referees with interest.

The manuscript has been reviewed considering the comments in your letter.

In addition, the technical corrections requested have been carried out.

We have responded point by point to the suggestions of reviewers and this is shown below. Where we feel a change would improve the manuscript, this has been done and the change is highlighted in the text.

Reviewer #1:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: This editorial provides a deep revision of the publications about the connection between SARS-CoV-2 virus and acute pancreatitis (AP) cases among COVID-19 patients. Besides the molecular mechanisms authors review the impact of the virus in pancreatitis' severity, diagnostic approaches, scores, and therapeutics using the most recent and relevant available literature. Thus, this in-depth manuscript compiles and summarizes important information for clinicians. The manuscript is well written with appropriated language and grammar. Abstract summarizes adequately the important messages. Enough references are presented. They are relevant and include recent articles on the area. “WHAT DO WE KNOW ABOUT ACUTE PANCREATITIS IN COVID-POSITIVE PATIENTS? – Authors' statement that “SARS-CoV-2 cannot be said to be an etiological agent of acute pancreatitis” is an accurate conclusion. Appropriate literature about AP severity in these patients is given. Are any differences of the severity of AP among vaccinated and non-vaccinated COVID-19 patients? We would expect that COVID-19 positive vaccinated patients have less severe AP with less multiorgan dysfunction. In “COVID-19 VACCINE AND PANCREATITIS” it would be interesting to see if other vaccine types have any association with AP. Authors are correct in suggesting continuous monitoring and post-marketing surveillance. In the section “DO WE NEED TO CHANGE THE DIAGNOSTIC AND THERAPEUTIC APPROACH?” it's clear that available laboratory parameters and scores fail to predict outcome specifically in COVID-19 positive patients. The therapeutics are too extensive – it would be reasonable for an article about AP however it is pretended to point the differences in the management of COVID-19 patients with AP. Those differences (or similarities perhaps) aren't explicit. Figures seem to add little to the article since they depict CT and intraoperative findings non-specific to COVID-19 positive patients. I suggest eliminating those. I would find rather interesting to include tables regarding the proposed mechanisms of COVID-19 related-pancreatitis or its' approach.

My co-workers and I thank Reviewer 1 for the compliments on our work.

We read the reviewer's comments carefully.

We have included a few sentences about the development of pancreatitis after other types of vaccinations as well.

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Now, the literature data do not allow a definitive assessment of the severity of acute pancreatitis in subjects not vaccinated against COVID-19 compared to vaccinated patients. The data are still few and anecdotal. We have reduced the number of photos. The photos are all personal observations. The photos document treatments performed in non-COVID patients and in patients with COVID-19, as clearly written in the legend of the figure. We believe the photos make the manuscript more comprehensive. We have not included a table regarding the proposed mechanism of pancreatitis related to COVID-19 as there are already many data in the literature on this topic. We do not have specific expertise on these etiopathogenetic mechanisms.

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: The authors report recent evidence on the correlation between COVID-19 infection and acute pancreatitis.

My co-workers and I thank Reviewer 2 for the compliments on our work.

Science editor:

The manuscript has been peer-reviewed, and it's ready for the first decision.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Scientific Quality: Grade B (Very good)

My co-workers and I thank Reviewer 2 for the compliments on our work.

The manuscript was revised in accordance with the suggestions made by the reviewers. The text was revised and corrected by a native English speaker (Dr. Neill James Adams).

Company editor-in-chief:

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is

conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022. The title of the manuscript is too long and must be shortened to meet the requirement of the journal (Title: The title should be no more than 18 words). Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the Reference Citation Analysis (RCA). RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>.

The title has not been changed. The title consists of 15 words.

The figures have been organized in a Power Point file, in accordance with the editorial guidelines.

Thank You very much for your interest, we look forward to your reply.

Sincerely,

Giuseppe Brisinda