

Dear Editor,

We are very grateful to receive information about the revision of the manuscript. We are very appreciative of the opportunity you have given us and believe that the revisions will make the manuscript more comprehensive and improved. Below is our response to the reviewers.

Reviewer #1:

Abbreviations need to be clarified. Revise grammar/punctuation of highlighted words
More diagrams/figures are recommended to summarise the huge amount of data present in the manuscript If possible causes of cirrhosis in pediatric group need to be considered. The burden of HCC needs to be highlighted.

Response:

Thank you very much for your insightful comments. We have added all the abbreviations. We did a second round of English polishing to refine the language. We have further summarized the data in the text and added three tables (Tables 2, 3, and 4). We have conducted further searches and added additional data in the pediatric population, however more relevant data are still lacking. We have added another section to summarize the epidemiology of HCC in patients with cirrhosis, which is also summarized in the table (Table 4).

Reviewer #2:

The manuscript addresses in a good form the following criteria: title, abstract, key words, background, methods, conclusions and references.

Response:

We are very grateful for your generous review and appreciate the recognition of our manuscript.

Reviewer #3:

The article sent for review addresses a very important and current topic of liver cirrhosis, taking into account epidemiological data. In my opinion, the article, with minor corrections, is worth publishing because the available literature lacks consistent epidemiological data on this pathology and its consequences. Below are my comments that should be taken into account in order to improve and improve your work:

1. It is worth considering changing the title of the article to: Epidemiology of liver cirrhosis and associated complications: current knowledge and future directions.
2. I would modify keywords, e.g. Causes, Cirrhosis; Complications; Cost; Epidemiology; Feature.
3. In Introduction (also table 1) - The authors of the study focused on selected causes of cirrhosis, including NAFLD, NASH, HCV, and HBV. Are there data in the literature on other causes, e.g. drug-induced, autoimmune, metabolic diseases, biliary tract diseases?
4. Methods - Why chronic liver disease was considered when searching in pubmed, not consequences / complications.
5. In figure 1 - Abbreviations should be explained (SBP, AKI,CHE, OHE, HRS, MDRO).
6. I suggest that future directions should be a separate point, and the conclusions should be more precise.

Response:

We greatly appreciated your thoughtful comments.

1. We strongly agreed with your suggestions and have revised the title of the manuscript accordingly.
2. We strongly agreed with your suggestions and have revised the keywords.

3. For cirrhosis of other causes, global epidemiological data are still lacking and therefore we had not summarized in the text.
4. We strongly agreed with your comments and made changes to the method section you mentioned.
5. We have added to the abbreviations in Figure 1.
6. We strongly agreed with your suggestion and separated the future directions from the conclusions and simplified the conclusions.

Thank you very much for your suggestions and considerations, and please do not hesitate to contact us if there are any questions.

Sincerely,

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