Point-by-point response to the reviewer's comments.

General considerations.

We thank the reviewers for the time spent revising our work and for the valuable comments. The corrections based on the reviewers' comments were made, and a revised manuscript with the highlighted changes was attached. We hope our replies and modifications will meet the reviewers' requirements.

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: nicely narrated.

Re: We thank the Reviewer for the favorable evaluation of our manuscript.

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Re: Authors are grateful for the valuable comments of the Reviewer. We tried our best to address each comment in the following report.

Specific Comments to Authors: 1. Please organise the manuscript better, the information is detailed but diffuse.

Re: We have reorganized the text and the sequence of paragraphs, trying to make reading the various topics covered more fluid and linear.

2. Create more sections - address the relationship with IBD, Liver disease in more detail and compare with normal population versus elderly.

Re: Following the reviewer's comment, we have added sections for each topic (IBD, liver disease, and pancreatic disease) to describe the differences in elderly patients better.

3. The authors should cite more detailed works, including systematic review on outcomes of IBD.

Re: According to the reviewer's comment, we have added in the text (and among the references) data from some systematic reviews regarding the COVID-19 outcomes in IBD patients.

4. Response to vaccination in GI disease and impact of age not addressed.

Re: According to the reviewer's comment, we have added some paragraphs (and references) regarding COVID-19 vaccination response in patients with different GI diseases and if there are any differences according to the patient's age.

5. For each condition create a table to emphasise differences in presentation, outcomes in elderly vis-a-vis normal adults.

Re: We are grateful to the reviewer for this comment. In the original text are tables for each clinical condition, and data relating to the differences (if any) between elderly patients and the rest of the population are reported. However, we have observed that studies specifically designed with this objective have yet to be conducted. Therefore, the data reported have been extrapolated from the text of the available studies.