

We thank the reviewers and editors for their valuable comments. Please find the point-to-point responses below and the relevant changes in the R1 document highlighted in yellow.

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: The article titled “Budd-Chiari Syndrome in Children: Challenges and Outcome “ provides a comprehensive overview of Budd-Chiari Syndrome (BCS), covering its clinical features, diagnostic challenges, treatment options, and future directions for research. It presents a detailed discussion of each aspect, offering insights into the complexities of BCS management. The article is informative and well-structured, providing valuable information for medical professionals, researchers, and individuals seeking to understand BCS. It highlights the importance of early intervention, the role of radiological endovascular intervention, and the need for long-term monitoring. Additionally, it acknowledges the challenges in diagnosing and distinguishing BCS from other conditions, such as hepatocellular carcinoma.

It would be useful to include citations of the following studies that have evaluated the use of liver stiffness and spleen stiffness (PMID: 24383922, PMID: 26973405, PMID: 27363587), which have contributed to the understanding of the utility of these tissue stiffness measurements and could further enrich the discussion regarding the use of such methods in the management of this syndrome.

Answer: Dear reviewer, thank you for your comments. We have now cited the above mentioned articles on liver and splenic stiffness and their clinical utility.

The article also underscores the rarity of BCS and the limited data available, emphasizing the need for further research and standardized protocols, especially in pediatric cases.

Answer: Dear reviewer, thank you for your comments. We have now discussed about the rarity of BCS and limited published literature and need for future research.

Overall, the article provides a thorough and insightful overview of BCS, its diagnosis, treatment options, and the challenges involved, making it a valuable resource for those interested in the topic.

Answer: We thank the reviewer for the encouraging comments

Reviewer #2:

Scientific Quality: Grade D (Fair)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Major revision

Specific Comments to Authors:

The authors did not focus on the current status of BCS in children.

Answer: We agree with the reviewer. We have now focussed on the current status of BCS in the pediatric population and added more pediatric studies.

The unique characteristics of BCS in children should be added in the abstract and compared with the characteristics of BCS in adults in the main text. Evidence is mainly from the adult patients

Answer: We agree with the reviewer that children with BCS have certain unique characteristics that separate them from adult patients with BCS. We have now added the unique features of pediatric BCS in the abstract as well as in the main text under a separate heading and have added more references from pediatric studies.

Please distinguish the characteristics of BCS between children and adults.

Answer: We agree with the reviewer. We have now added a section on the difference between adults and children with BCS.

More recent references, including epidemiological data from meta-analysis (PMID: 30528513), should be reviewed and discussed.

Answer: We agree with the reviewer. We have now added the recent epidemiological data from the above mentioned meta-analysis and discussed its finding.