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Reviewer #1:

First of all, thank you very much for your positive comments on my manuscript and your suggestions for revision. Below are some of my responses based on your suggestions.

1、This study evaluated retrospective patient data, however, documentation of ethics committee approval was not provided and this documentation is not mentioned in the manuscript.

Dear reviewer : The study was reviewed and approved by the Ethics Committee of the Shandong Provincial Hospital Affiliated to Shandong First Medical University (Shandong Provincial Hospital) [Approval No. 2023-462]. The ethics committee approval document has been uploaded to the system and is indicated in the footnote of the manuscript.

2、 Even though the abbreviations have been cited in the abstract, it is important to repeat them in the introduction (LPD, OPD...).

Dear reviewer : This study has followed the opinions of the journal and reviewers. Abbreviations are defined when they first appear in the abstract, core points, text, and article highlights. The abbreviations are used directly when they appear again.

3、 Provide the abbreviation "ASA" in full.

Dear reviewer: ASA (American Society of Anesthesiologists)

4、 Please note that the manuscript must be prepared using 12 pt Book Antiqua font.

Dear reviewer : The manuscript's font has been changed to 12 pt Book Antiqua.

5、 Do not use superscript numbers or symbols to identify the authors'

affiliation.

Dear reviewer: The manuscript has been revised by the author and his/her institution in accordance with the journal's standard format requirements and the reviewers' comments.

6、Core Tip is absent.

Dear reviewer: Relevant content to Core Tip has been supplemented and highlighted above the introduction of the manuscript.

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Reviewer #2:

The retrospective nature of the study determines the limitations of this study. The incidence of pancreaticoduodenectomy is relatively high, and given the international data, the methodology is imperfect and not worthy of publication.

Dear reviewer: Thank you very much for your question! This study provides a calculation-based, less subjective method to evaluate blood loss during pancreaticoduodenectomy, which is more accurate, objective, and simple than visual inspection and gravimetric methods. We also take into account the impact of blood transfusions when calculating blood loss to make the results more accurate. According to relevant literature, the use of mass loss method of hemoglobin to calculate blood loss during pancreaticoduodenectomy has not yet been found. This study not only provides a new idea for evaluating surgical blood loss and comparing the clinical effects of different surgical methods, but also analyzes the risk factors for blood loss, which will help reduce perioperative blood loss.

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Science editor:

Thank you very much for your summary and questions. I will reply from the following aspects.

1、 Reviewer pointed out that the retrospective nature of study demeits the study. pancreaticoduodenectomy rate is relatively high, keeping in view international data Methodology is not sound to merit publishing.

Dear Science editor: We provide a calculation-based, less subjective method to assess blood loss during pancreaticoduodenectomy and analyze its associated risk factors. This study not only provides a new idea for evaluating surgical blood loss and comparing the clinical effects of different surgical methods, but also helps reduce perioperative blood loss.

2、 The author has not declared any relevant ethical and ethical documents.

Dear Science editor: The study was reviewed and approved by the Ethics Committee of the Shandong Provincial Hospital Affiliated to Shandong First Medical University (Shandong Provincial Hospital) [Approval No. 2023-462]. The ethics committee approval document has been uploaded to the system and is indicated in the footnote of the manuscript.

3、 There are issues with the format of manuscript, and the manuscript content is incomplete.

Dear Science editor: This study perfected the format and content of the manuscript based on the journal's guidelines and requirements for retrospective research and the reviewers' comments. We have revised the Authors, Corresponding Authors, Funding Support, Tables, Discussion and other sections and added Author Contributions, Core Tip, Article Highlights and Footnotes sections.

四、

Company editor-in-chief:

When revising the manuscript, it is recommended that the author supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript.

Dear Company editor-in-chief: Thank you for your valuable comments on this study! Based on the RCA database and PubMed database you provided, I searched the relevant cutting-edge knowledge of this study. We have supplemented and perfected the relevant cutting-edge knowledge on the relationship between blood sugar, BMI and bleeding, as well as intraoperative bleeding in the manuscript.