

[We would like to thank the Editorial Office for the positive evaluation of our Letter to Editor. The manuscript was submitted to a native English-speaking expert in our Local Department to improve the quality of the English.](#)

Reviewer #1: I accept the above Letter to Editor (88341) for publications. It's very well-written. So, my comment- It's accepted for publication.

Answer: [We would like to thank the Reviewer for her/his kind comment on our manuscript.](#)

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: In this study, the author diagnosed cirrhosis by using radiology tolls. However, the author also collected data on history, etiology of cirrhosis and laboratory data.(1) In inclusion criteria, the author didn't describe the characteristics of esophageal varices but the author showed the ALBI score. Many studies show that ALBI is a highly prognostic score for liver cirrhosis, it is correlated with HVPG levels, and it can be used to predict the presence of gastroesophageal varices and to stratify bleeding risk.(2)(3) Decompensated cirrhosis has many complications. In some studies, ascites is the most frequently documented (4). In this study, it was variceal bleeding. The number of patients with high-risk ALBI grade was scarce because the sample size was not enough big. The decompensation events were also scarce because the time of follow-up was not long.

References 1.Navadurong H, Thanapriom K, Wejnaruemarn S, Prasoppokakorn T, et al . Validation of the albumin-bilirubin score for identifying decompensation risk in patients with compensated cirrhosis. World J of Gastroenterol 2023; 29: 4873-4882 2.Hsieh YC, Lee KC, Wang YW, Yang YY, Hou MC, Huo TI, Lin HC. Correlation and prognostic accuracy between noninvasive liver fibrosis markers and portal pressure in cirrhosis: Role of ALBI score. PLoS One. 2018;13:e0208903. [PubMed] [DOI] [Cited in This Article: 2] [Cited by in Crossref: 19] [Cited by in F6Publishing: 22] [Article Influence: 4.4] [Reference Citation Analysis (0)] 3.Miyamoto Y, Enomoto H, Nishikawa H, Nishimura T, Iwata Y, Nishiguchi S, Iijima H. Association of the Modified ALBI Grade With Endoscopic Findings of Gastroesophageal Varices. In Vivo. 2021;35:1163-1168. [PubMed] [DOI] [Cited in This Article: 1] [Cited by in Crossref: 3] [Cited by in F6Publishing: 4] [Article Influence: 2.0] [Reference Citation Analysis (0)] 4.Angeli P et al, EASL Clinical Practice Guidelines for management of patients with decompensated cirrhosis .J Hepatol 2018; 69: 406-460

Answer: We thank the reviewer for the insightful and interesting comments. We acknowledge that the authors gathered medical history, laboratory data, and patient etiology information for the study participants. However, the methods section does not specify whether all these parameters were considered when selecting patients, while it is stated that the inclusion of patients was made after CT scans or MRI results suggestive of cirrhosis.

We agree with the Reviewer about the possible role of ALBI-score as it correlates with hepatic venous pressure gradient and its role in predicting the presence of esophageal varices as this could be an important point in future research. We added a sentence in the letter regarding it.

Finally, we agree with all the explanation the reviewer reported due to the limitation of the study.

Reviewer #3:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: The letter to editor by Andrea & Francesco provide a comment to highlight the preliminary nature of the evidence reported by the authors. Further studies are needed to validate the ALBI score in predicting decompensation in patients with cirrhosis. The comments are insightful and constructive.

Answer: We thank the Reviewer for her/his kind comments on our contribution.