

Response Letter

Reviewer #1:

Specific Comments to Authors: Dear Editor, thanks to the authors for this good-organised retrospective study. The manuscript adequately describes the background, present status and significance of the study. Also, the current study interprets the findings adequately and appropriately. I think that it will contribute to the literature.

Response: Thanks to the reviewer for understanding the clinical value of this study after reviewing our manuscript.

Reviewer #2:

Specific Comments to Authors: Many mistakes highlighted in yellow and need correction and/or explanation. Need to add endoscopic and pathology photos.

Response:

We highly appreciate the reviewer's insightful comments on improving the readability of the manuscript. In the revised manuscript, the highlighted mistakes were amended and corrected. In addition, to improve the quality of the text, the final revised manuscript has been edited by a professional medical editor whose mother tongue is English. The English editing certificate is shown below. Regarding endoscopic and pathology photos, we have added the endoscopic and histopathologic images to the revised manuscript (Figure 1-2). Moreover, due to the suggestion by reviewer #3, the case descriptions in the result section were moved and integrated to the discussion section. Finally, we would like to express our sincerely thankfulness to the anonymous reviewer for your valuable comments on improving the quality of our study.



Reviewer #3:

Specific Comments to Authors: The manuscript is presenting the experience of a center in treating eosinophilic gastroenteritis in children. The study includes 22 patients diagnosed during a 3-year period. The paper is in general well written, using a quite good English, even that some corrections are needed. The structure of the paper is a correct one, beside that there is a combination of a study and 4 case reports (three of them with relapses). I would discuss the most important clinical aspects of the cases in Discussion and not presented them as short case-reports. The paper needs some editing corrections. In Table 1, for lab results I would not use "abnormal patients", probably better number of patients with values out of range or other way to define that. Also, mean albumin, or mean CRP level. There is a need to define the values % +/- SD, mean +/- SD as you did with n, %. I would include a section (paragraph) with the limitations of this study before the Conclusions section. The paper includes 26 references, 6 of them more recent (last 3 years).

Response:

Thanks for the reviewer's valuable comments. The original case reports aimed to describe our experience in the diagnosis, initial treatment, and relapse treatment of patients with high eosinophil percentage. Based on the reviewer's suggestion, we

moved the cases description to the Discussion section and concisely combined our original discussion. In addition, the endoscopic and pathological photos of the children were added in the revised manuscript (Figure 1-2). We agree with the reviewer's concern that the term "abnormal patient" is indeed an inappropriate description. In the revised Table 1, we amended them to Albumin (Outside the normal range), CRP (Outside the normal range) and Total IgE (Outside the normal range). In addition, the below description was shown in the legend of Table 1. "Continuous variables are expressed as mean \pm standard deviation (SD), while categorical variables were shown as the count and percentage." Finally, we added a new paragraph describing the limitations of this study before the Conclusion section, and updated the references for the last three years. To improve the quality of the text, the final revised manuscript has been edited by a professional medical editor whose mother tongue is English.

Re-reviewer:

Good effort in responding to the remarks.

Response:

Thanks for your comments.