

## Point to point reply to the comments of the Reviewer<sup>[1]</sup><sub>SEP</sub>

On behalf of all the Authors, I would like to thank the Editor and the Reviewer for Their comments and suggestions that significantly allowed improving the quality of the manuscript.

According to Their suggestions, manuscript and tables have been modified and changes have been highlighted in the updated version submitted for the review.

Please, find below a point to point reply to the comments.

Kindest regards,

The Corresponding Author

### REVIEWER 1

Congratulations on the excellent job performed. “**Utility of Preoperative Systemic Inflammatory Biomarkers in Predicting Postoperative Complications After Pancreaticoduodenectomy: Literature Review and single Centre Experience**” is a very interesting manuscript about biomarkers to assess postoperative complications following pancreaticoduodenectomy. The literature lacks evidence in this field. So, your paper is necessary to improve the evidence available.

However, I have a few questions:

**Reply:** We thank the Reviewer for Her/His positive comment about our manuscript.

**Comment:** Why you used Odds Ratio instead of relative risk reduction? Could this switch lead to misleading?

**Reply:** We thank the Reviewer for Her/His comment. Statistical analysis has been performed by one of the co-Authors that is full professor of medical statistics. According to his opinion there should not be possibility of misleading, because the present is a retrospective study. More in details, in his opinion since RR can be measured based on data of incidence and considering that in a retrospective study are used prevalence data, the OR is more appropriate than RR. We thank the Reviewer for this comment.

**Comment:** The first paragraphs of the result are related to the discussion. Don't you think that would be more adequate to change this structure?

**Reply:** We thank the Reviewer for Her/His comment and we totally agree with Her/Him. Following this suggestion the above-mentioned paragraphs have been removed form the results and have been correctly reported in the discussion. These changes have been highlighted in the revised manuscript.