

We are pleased that the editorial team and reviewers found merits in our study and have given us the opportunity to respond to their concerns and to revise the manuscript. We have attempted to deal with all the issues/questions raised by the reviewers, and we hope that the revised manuscript is now suitable for publication for publication in World Journal of Gastroenterology.

Point by point response:

**Reviewer n°1:** I read with great interest this invited Mini-Review by Nardelli et al entitled “Spontaneous porto-systemic shunts (SPSS) in liver cirrhosis: Clinical and therapeutical aspects”. It is a well-written paper, where the authors describe successfully the association of “SPSS and hepatic encephalopathy”, “SPSS and esophago-gastric varices”, “SPSS and portal vein thrombosis” and “SPSS and liver transplantation”. They also provide a short description of the “Portosystemic shunt syndrome” and management with “Portosystemic shunts occlusion”. My comments on this paper are as follow:

a) The exact diameter which discriminate SPSS into large or small sizes should be provided (page 3 – introduction).

**As requested, we added a sentence in the Introduction section**

b) A detailed description about methods that could be used for the diagnosis of SPSS should be provided. Which methods are available? Which is the specificity and sensitivity of these methods? Which is the gold standard for SPSS diagnosis? Is there any guidance for screening cirrhotic patients for the presence of SPSS in order to monitor closely and to treat timely?

**As requested, we added these informations in the Introduction section**

c) Rarely, SPSS could happen in non-cirrhotic patient. This condition should be mentioned briefly in few sentences in the introduction.

**As requested, we added these informations in the SPSSs and HE section**

d) As we know the MELD score does not perfectly reflect the severity of liver disease, neither taking into account portal hypertension nor encephalopathy. Thus, the possibility of implementing the presence of SPSS into the MELD scoring system aiming to improve prognostic prediction should be discussed.

**As requested, we added these informations in the SPSS and esophago-gastric varices section**

e) The impact of SPSS shunts involving renal artery on renal function should be discussed. f) A recent paper by Praktinjo et al in J Hepatol 2020 should be mentioned.

**As requested, we added reference number 32**

**Reviewer n°2:** This is not a research article, but a literature review. Authors concisely summarized the clinical features of spontaneous porto-systemic shunts (SPSS) in patients with cirrhosis. if possible, a picture/diagram showing locations of SPSS in relation to venous structures should be added.

**As requested, we added the in the figures the names of the venous structures.**

Thank you for this opportunity,

Best regards

Lorenzo Ridola, MD, PhD