

Feb 15th, 2022

Dear editor,

Please find attached files of revised manuscript in word format. Revision has been made according to the suggestions of the reviewer:

Reviewer: 06129219

The endoscopic ultrasonography has the advantages of both endoscopy and ultrasonography, can effectively evaluate the changes in intestinal wall thickness and hierarchical structure, and allows monitoring for changes in disease activity and severity. Authors used the 79 patients with UC to investigate the value of endoscopic ultrasonography in the evaluation of severity and prognosis of ulcerative colitis. The article is well written, and the idea of the study is novel. The text is strictly logical. The results are interesting and they confirmed that ultrasonic endoscopy also has important value in assessing the treatment effect and prognosis of UC. The manuscript provided a theoretical basis for clinical diagnoses and could be useful for other studies in this field. I recommend that the manuscript can be published.

Reviewer's code: 06129246

I found the manuscript entitled "Application value of endoscopic ultrasonography in the evaluation of condition and prognosis of ulcerative colitis" original, very interesting, well-structured and with huge impact on clinical diagnoses. The clinical diagnosis and treatment efficacy of UC are mainly established through histopathological examination, barium enema, and endoscopy. However, it is difficult to accurately evaluate the severity of the disease, and there are some limitations in clinical applications. In this study, 79 patients with UC were followed up 2 and 6 months after treatment to study the application value of ultrasonic endoscopy in the evaluation of severity and prognosis of ulcerative colitis. The results showed that the ultrasonic

endoscopy findings of the patients after treatment were improved compared with those before treatment. This confirms that ultrasonic endoscopy also has important value in assessing the treatment effect and prognosis of UC. It can guide clinical prevention and intervention in subsequent exacerbations, to improve the treatment effect and prognosis of the disease. Comments/suggestions: 1. Title and key words - well chosen. 2-The abstract summarized and reflect the described in the manuscript. 3. Introduction contains the most important data to support the importance of the study. 4. Material and methods - the paragraphs are generally well structured and explained. 5. Results section is well and clearly presented with pertinent statistics. 6. Discussion paragraph could be expanded to underline the clinical application of this study and the potential limitations. Also, directions for future research could be discussed. 7. Good quality of the Tables. 8. References –appropriate, latest and important.

Thank you for your advice.

Answer: After receiving the comments, we read the article in detail, discussed the clinical application, potential limitations and future research direction of this study.

Specific Comments To Authors

As the editor, I recommend removing Tables 1-4. Only Table 2 can remain; others are unnecessary (readers are already familiar with these scoring systems).

A "Table 1" is missing, which should include all data of all participants, age, gender, and other variables in a single table.

Tables 5-6 and 8 could be better represented as box and whisker plots. You can compare 3-groups first, then add two group comparisons as t-tests.

A correlation analysis between UCEIS and EUS-UC would also provide additional data (You can add the results in Table 7).

Discussion should be expanded, underline the clinical application and the potential limitations. Also, directions for future research could be discussed.

Answer: Thank you for your suggestion. We have updated the results section. And we prefer to keep the tables 1- 4. And as the tables are enough, we didn't make figures for the data. Discussion was revised and updated accordingly.

Sincerely Yours,

Huajun Ye