Dear Editor and Reviewers,

Thank you for your valuable comments.

Please find enclosed our answers.

Sincerely,

**Authors** 

## **REVIEWER 1**

1. In the references cited by the authors (1-5), the rate of HLA-B27+HLA-B51 positivity is 18, not 23. Authors should verify the numbers by checking the references.

**Answer:** Thank you very much for your observations. We correct it.

2. There are no HLA-B27+HLA-B51 positive patients in the case reports of Lim et al. 3.

Answer: We reorganized the data based on this necessary information. I suggest putting +

and - signs instead of Y and N in table 1.

**Answer:** We included these suggestions.

## **REVIEWER 2**

If patients with back pain have HLA-B27 positive, SpA may be the right diagnosis. There is a strong association between BD and HLA-B51/B5. However, there are very few cases with SpA and positive HLA-B51. If the author explains the role of HLA-B51 in the pathogenesis of SpA, it will be more convincing.

**Answer:** We included this topic in 3<sup>rd</sup> paragraph. However, we would like to emphasize that the literature lacks more theoretical contributions on these rare diseases.