

## Response to reviewers

Dear Editor

We are delighted that you found our manuscript to be of potential interest for the readers of WJG, and we thank the reviewers for the time and insightful comments:

Regarding specific comments:

Reviewer 1.

*I believe this is a well written article, but I wonder if the subject is really a scientific and important one. It is somehow empiric to ask only the opinion of doctors an, from my experience, I get often false ideas from my practice. I respect your work, I understand you invested a lot of it in this research. Also, I made a few language correction that you can see in green in the document attached*

We thank the reviewer for his/her comments. We absolutely agree that physicians practice (and opinions) may be empiric rather than evidence based. The purpose of this study – like any questionnaire study – was exactly to reflect the disparities between different experts and to highlight the knowledge gap for this practical question, for which evidence is lacking. This is also why we initiated an international RCT to examine this dilemma. Nevertheless, in light of the reviewer's comment we added a sentence to the limitations discussion stating that : " As evidence is lacking, physician opinions as obtained here are empiric-based, and does not imply that the approach of the majority is necessarily the best therapeutic strategy".

We have also corrected the language where indicated by the reviewer.

Reviewer 2

*congratulations for your article,*

We thank the reviewer for his/her positive view of this work.

*besides, I would like to make some observations: 1.- Regarding the factors which impact in the therapeutic choice 5-ASA, it might have been considered if the oral route can be a limiting factor in case of hospitalized patients for intravenous corticosteroids treatment.*

We thank the reviewer for this comment, and have added a sentence to state: "Moreover, it is possible that some physicians opting against administering 5ASA to acute UC patients are wary of bio-availability of orally administered drugs in this situation, but this question was not investigated in the present study".

*2.- In relation to the sample size: I think that estimated survey respondents rate might have been considered*

We thank the reviewer for this comment, but are not sure we fully understand. Power sample size calculation was performed and detailed (with its limitation) in the Methods. If needed, we would be happy to elaborate more pending further clarification of the question from the reviewer

*3.-In the discussion, authors might comment a little bit more some results*

We have expanded the Discussion as requested.

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