

Manuscript entitled: "Long-term follow-up of liver alveolar echinococcosis using *Echinococcosis multilocularis* ultrasound classification"

Dear Editor,

Thank you for your valuable feedback and the comments of the reviewers. We have provided point-by-point responses to the suggestions and comments.

We feel that the manuscript has highly profited by addressing the reviewers comments, and it is now much more concise.

We would be very pleased if you considered this manuscript suitable for publication in *World Journal of Gastroenterology*.

Looking forward to hearing from you;

Sincerely,

Prof. Dr. Wolfgang Kratzer, MD

Point by Point-Statement

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: Comments

Was the operator who did the sonography in the first time the same one who did the follow up examinations?

Answer: The initial investigators and follow-up investigators were not identical.

If both are different, then there may be an interobserver variability?!

Answer: We agree with the reviewer that an interobserver variability would be interesting, which, however, was not explicitly investigated by us. A corresponding note can be found in the limitation section.

...Due to the sample size and study design, no calculation of interobserver variability between examiner 1 and examiner 2 and 3 was performed...

In page 14, what is meant by PNM?

Answer: Thank you for the note. We have explained the abbreviation PNM in the Main Document.

In discussion section, page 15, you suggested that development of microcalcifications denotes increased disease activity, however in WHO classification of cystic echinococcus GRANULOSUS, presence of calcifications in type V cysts (CE-5) means inactive cyst evidenced by dystrophic calcification in dead alkaline tissue! Are these contradictory findings?

Answer: These are no contradictory findings. Alveolar echinococcosis and cystic echinococcosis are two morphologically different manifestations, which should not be compared and mixed.

(1) Science editor:

This retrospective study addressed treatment-related sonomorphological changes and differential diagnoses during follow-up in a limited number of patients with alveolar echinococcus (AE). The results show that primarily the initially classified as hemangioma-like or pseudocystic patterns can show differences over time. The manuscript is well written and contains new information considering the importance of ultrasonographic examination in the follow-up of this disease. The following comments can be made:

1. Conflict-of-Interest Disclosure Form and Copyright License Agreement should be added.

Answer: Thank you for the note. The Conflict-Of-Interest Disclosure Form and Copyright License Agreement have been added.

2. As stated by the authors, the number of cases is very limited, and results should be evaluated in a more extensive patient series. It is therefore recommended to emphasize more extensively that the manuscript presents the findings of a preliminary study.

Answer: Thank you for the note. We have added in the manuscript that the present work is a preliminary study.

3. There are 31 references in the article. Seven of them belong to one author (Julian Schmidberger), and 8 of them belong to another author (Kratzer W), and there are 15 self-citations in total. However, according to the journal guideline, the self-referencing rate should be less than 10%. Please keep the reasonable self-citations (i.e., those most closely related to the topic of the manuscript) and remove all other improper self-citations. If the authors fail to address the critical issue of self-citation, the editing process of this manuscript will be terminated.

Answer: The strict guidelines of the WJG are an obligation for us. Due to the rarity of the disease and the few research groups worldwide doing research on these issues, the majority of the self-citations we cited are essential for the understanding of the paper. We have changed the citations that are not so relevant.

4. All questions raised by the reviewer should be answered.

Answer: Thank you for the note. We have answered the questions and points mentioned by the reviewer.

5. Please prepare and arrange the figures using PowerPoint to ensure that the editor reprocesses all graphs, arrows, or text portions.

Answer: The illustrations are added and provided in a PowerPoint file.

Language Quality: Grade A (Priority publishing)

Scientific Quality: Grade B (Very good)

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors.

Answer: Thank you for your appreciation of our manuscript and the opportunity to submit a revision of your manuscript.