

We thank the reviewers for their insights and suggestions, which we address in this point-by-point response and in the resubmitted version of the manuscript. For a greater clarity, all changes made in the manuscript are highlighted in yellow. Also, a new English grammar revision of the updated manuscript was performed and the valid certificate is attached.

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: This is a manuscript of various histological scoring indices in inflammatory bowel disease (IBD). The authors summarized sufficient studies and meta-analysis. It is clearly written chronologically and presents an updated authoritative consensus about basic principle and predictive factors of CD and UC. I don't have any academic opinions to suggest. If possible, I would like to add a table about the content of "the score provides information about the overall microscopic severity of the disease". I think this part will be understandable in a form of a table.

We suppose the reviewer is referring to the IBD-DCA score, discussed in detail at the end of the manuscript. A table showing the individual assessed variables of the score was added to the manuscript (Table 6).

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: In this review, the authors summarized the most widely used histological scoring indices for IBD, and discussed their advantages and limitations. The topic is interesting and the paper is well written. However, the authors should address the following points.

1. Definitions of histological remission of the five histological indices (shown in Tables) were not outlined.

The indices were constructed to evaluate a degree of histopathological severity and they were not primarily intended to define the histological remission. As stated in the manuscript, the exact definition of the histological remission is still not fully established and several interpretations exist. The most commonly used definitions are those stated in official guidelines and consensus panels, which is explained in detail in the manuscript, but many authors also use their own definitions for the research purposes which often vary even within the frame of one specific scoring index. It is thus impossible to include any official definitions in the individual scoring indices.

2. IBD-DCA was not summarized in a Table.

A table showing the individual assessed variables of the score was added to the manuscript (Table 6).

3. No conclusions were stated in the paper.

Conclusions paragraph was added at the end of the manuscript.

4. There was no explanation for κ .

κ refers to the Cohen's kappa coefficient, used to measure inter-observer and intra-observer agreement. The meaning of κ was specified in the manuscript.

Company editor-in-chief:

I have reviewed the Peer-Review Report, the 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. Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file. Please authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022. If an author of a submission is re-using a figure or figures published elsewhere, or that is copyrighted, the author must provide documentation that the previous publisher or copyright holder has given permission for the figure to be re-published; and correctly indicating the reference source and copyrights. For example, "Figure 1 Histopathological examination by hematoxylin-eosin staining (200 ×). A: Control group; B: Model group; C: Pioglitazone hydrochloride group; D: Chinese herbal medicine group. Citation: Yang JM, Sun Y, Wang M, Zhang XL, Zhang SJ, Gao YS, Chen L, Wu MY, Zhou L, Zhou YM, Wang Y, Zheng FJ, Li YH. Regulatory effect of a Chinese herbal medicine formula on non-alcoholic fatty liver disease. World J Gastroenterol 2019; 25(34): 5105-5119. Copyright ©The Author(s) 2019. Published by Baishideng Publishing Group Inc[6]". And please cite the reference source in the references list. If the author fails to properly cite the published or copyrighted picture(s) or table(s) as described above,

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Figures were submitted as decomposable figures in PowerPoint presentation according to the request of the editor-in-chief. Tables and references follow the requirements stated in the official guidelines for authors. The review stems from the detailed literature search and all the most recent and relevant publications were taken into consideration and incorporated in the manuscript.