

Point-to-Point Responses to the Reviewers' Comments

Editor

We sincerely appreciate your comments. We provided point to point answer to the editor and all reviewers.

[1] 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.

Response) We provided decomposable Figures in PPT and standard three-line tables.

[2] 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.

Response) We added the following copyright information to the bottom right-hand side of the picture in PPT: Copyright ©The Author(s) 2022.

Reviewer #1

Specific Comments to Authors: Both obesity and IBD are rapidly increasing in modern society, and the proportion of obesity among IBD patients is also reported to be higher now than that in the past. Traditionally, many clinicians associate IBD patients with a low or normal BMI as the complications of IBD, including decreased food intake, malabsorption, weight loss, and nutritional deficiencies. However, obesity is increasingly being associated with IBD due to its overall pro-inflammatory effect. Several epidemiological studies have suggested that 15-40% of IBD patients are obese, and hypothesize that obesity contributes to the development of IBD. Furthermore, obesity may affect the disease course or treatment response of IBD. With the increasing data supporting pathophysiologic and epidemiologic relationship between obesity and IBD, research interest on interventions for obesity as a novel management of IBD

is also increasing. In this review, the authors aimed to summarize the pathophysiology of obesity in IBD, the effect of obesity on the outcomes of IBD, the impact of obesity on the management of IBD, and the impact of obesity treatment on the outcomes of IBD. Further, this review aimed to present the current status of anti-obesity treatments in IBD patients. In this review, the authors put forward: there are claims that obesity contributes to the pathogenesis of IBD or that there are common factors contributing to both diseases, such as dysbiosis, but it is still insufficient to know the causal relationship or direction between them. Although data to assess the effect of obesity on outcomes in IBD are sparse and inconclusive, obesity may have a protective effect in CD and a poorer prognosis in UC. Obesity can clearly affect the treatment of IBD or surgery. Therefore, clinicians need to be aware that obesity can affect the treatment response to drugs and increase surgical complications. Although there are few studies, obesity treatment appears to have the potential to have a relatively favorable effect on IBD outcomes. Bariatric surgery appears to be relatively safe and effective in obese IBD patients. Therefore, it is necessary to compare the benefits and side effects of bariatric surgery for IBD patients. Some patients develop new onset IBD, especially CD, after bariatric surgery, so clinicians are advised to keep this in mind. We believe this manuscript is valuable for all the researchers who are interested in obesity and IBD. This study focuses on current research hotspots and frontiers, which is very important for subsequent research. The article also puts forward the current problems and future research directions. Therefore, I recommend accepting and publishing this manuscript..

Response) We appreciate your encouragement and positive comments.

Reviewer #2

Specific Comments to Authors: Dear authors, I really appreciate all your efforts to prepare this wonderful review in a very systemic manner. I have no comments regarding this review and can be published in the current status. Thank you and best wishes GOPAL

Response) We really appreciate all your encouragement and positive comments.