Dear Editor,

We would like to thank you and the reviewer for suggestions and comments on the manuscript. We have edited the manuscript, including a thorough language editing by a professional English editor and addressed all presented concerns as you can see in the rebuttal letter below. We also edited the format of the submitted manuscript according to recommended standards of your journal.

We believe that we have successfully addressed all concerns regarding the manuscript and it is therefore suitable for publication in *World Journal of Gastroenterolog.y*

On behalf of all authors

Peter Liptak MD, PhD.
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Reviewer 1

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: Dear Authors, I read with interest the editorial of Liptak P et al. Diagnostic tools for fecal incontinence: scoring systems are the crucial first step on the manuscript "New objective scoring system to clinically assess fecal incontinence" published in WJG by Garg et al in 2023. The manuscript is well written and the reading flows easily. In my opinion, the first part that offers a view on fecal incontinence is too long while the comments should be clearer and more in-depth including observations on the methodology. For example, the sentence "Disputable point could be considering the type of incontinence (urge, stress) on the same level as a symptom in this questionary. Although it provides high added value for the evaluation of incontinence it is possible to discuss that liquid incontinence could be more connected with stress phenotype rather than urge and thus asymmetrically provide higher severity numbers in these cases." Need to be better explained. Moreover, although this questionnaire proposed by Garg et is promising al, it lacks more conspicuous evidence of validity regarding their psychometric properties, content, structural, and construct validity. Furthermore, how long does it take to be filled in? I agree with the Authors that to comprehensively evaluate all possible pitfalls of this new scoring system more clinical studies are needed.

Answer from authors:

We would like to thank the reviewer for the excellent on-point comments. We further explained the mentioned section as could be seen in the revised manuscript marked by the yellow color. Also, we have included the reviewer question about time needed for filling the questionary as we considered this as a very valuable observation that need further clarification from the authors of the scoring system.

As for the first part, which reviewer consider too long. We would like to consider the editor and the reviewer to keep the length of the first section intact because we believe that it provide important introduction to the field of fecal incontinence which is sadly often overlooked by gastroenterology professionals who does not focus on motility gut disorders (despite its high prevalence). We think that the length of the first section reflects in the informative value of the manuscript therefore serve the proper role of the editorial in the scientific journals.

The language of the manuscript was thoroughly corrected by professional English editor.

(1) Science editor:

1 Scientific classification: Grade C. 2 Language classification: Grade B. 3 Specific comments: (1) Please provide the Language certificate. The English-language grammatical presentation needs to be improved to a certain extent. There are many errors in grammar and format, throughout the entire manuscript. Before final acceptance, the authors must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: https://www.wignet.com/bpg/gerinfo/240. 4 Recommendation: Transfer to other BPG journals (World Journal of Gastrointestinal Surgery).

Answer from authors:

Thank you for the valued observations. The manuscript was fully edited by professional English language editor (please see the attached certificate).

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, 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. Please authors are required to provide standard threeline 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. When revising the manuscript, it is recommended that the author supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply PubMed, or a new tool, the RCA, of which data source is PubMed. RCA is a unique artificial intelligence system for citation index evaluation of medical science and life science literature. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: https://www.referencecitationanalysis.com/, or visit PubMed at: https://pubmed.ncbi.nlm.nih.gov/.

Answer from authors:

Thank you for the positive evaluation of the manuscript. We add more references as could be seen in the section marked by yellow color. Also based on your recommendation we updated the table format to comply with the journal standards.