

SPECIFIC COMMENTS TO AUTHORS

- You did a great study. I suggest you that you need to write: 'wound' healing' instead of wound repair in page 3, 'mechanical' instead of mechanistic in page 9, and 'intraperitoneal 'injection instead of systemic injection in some pages.

A: We revised our manuscript.

- The study by Tai et al. is a proof-of-concept study that examines how TSP-1 influences peritoneal adhesion in rats. The authors find that the use of seprafilm is the best treatment followed by adTSP-1 local treatment. Intraperitoneal adTSP-1 treatment generated little effect. Overall, this study is useful to this field, however the limited scope and lack of depth of this study are a significant weakness. In general, the study lacks dose-response studies or any in-depth mechanistic investigations. The combination of these two weaknesses, even though mentioned by the authors, make it difficult to recommend this study for publication. That being said, outside of these issues, the authors should address the following to improve their submission: 1) Staining for TSP-1 and TGFB1 should be performed in all groups. The authors may have done this as the methods list that this was performed. Mason's trichrome methodology is missing. 2) The results section is very short and does not adequately describe the histological findings from figure 3. In addition, it is not clear which TSP-1 group is being examined in this figure. Histological assessments with H&E and Mason's trichrome should be performed in all groups including assessment of mononuclear cells. 3) As the adenoviral vectors are a key component of the animal treatments, please include additional information in the methods rather than just referencing a previous study. 4) TSP-1 can act by activating TGFB1 which is part of the reason it generates its multitude of effects. However, TSP-1 can also bind and act through receptors such as CD47. This should be discussed in much more detail and the discussion needs to be expanded. 5) As there were only a single dose of adTSP-1 given for the IP group, is it possible that a larger concentration could generate an effect? This should be discussed. 6) In table 1, what are the differences between a mild and moderate adhesion? Please provide additional details on scoring criteria for adhesions.

A: We revised the manuscript.