

In this study, the authors highlighted the prevalence of EC in non-HIV patients. The result of study is important as it described the high prevalence of EC in non-HIV patients which is still underdiagnosed as compared to HIV patients.

1. What was the reason for unusual high prevalence of EC in non-HIV patients, which is high compare to previous literature?
 - a. Response: Please see page 10 Discussion paragraph 1. We found that studies with a lower prevalence/incidence of EC tended to be older and conducted in East Asian territories while a more recent study within the U.S. had a higher overall incidence of 5.2%. This may suggest an increasing prevalence of EC among patients without HIV or a greater predominance of EC within the U.S. population. In addition, the prevalence of EC may have been underestimated in other studies due to methodological limitations such as including only patients undergoing routine health physicals or requiring the presence of white plaques on endoscopy for the diagnosis, which according to our results represents less than half of EC cases. However, further studies are needed to confirm the current prevalence of EC in the US.
2. In 1969 patients, endoscopic biopsy was performed. 295 patients had the diagnosis of EC. There were 118 patients with the diagnosis of EC who were excluded due to a lack of pathology results confirming the diagnosis of EC or insufficient data for review
How these 295 patients diagnosed as EC if lack of pathology results.
What were the indications for performing endoscopy and further biopsy in these patients?
 - a. Response: This patient population includes all patients who underwent endoscopic biopsies of the esophagus at these 5 centers during the study period. Per endoscopy reports, there were an innumerable reasons for endoscopy, which were symptom based, a few screening in asymptomatic patients and symptom/endoscopy finding based in terms of decision to biopsy. We have included symptoms and endoscopy findings of our patient population in figure 1 and table 2.
3. How the controls were selected?
 - a. Response: Please see page 6 study population paragraph. The International Classification of Diseases, Ninth and Tenth Revisions were used to identify patients who had endoscopic biopsies of the esophagus (ICD-9-CM 42.24 and ICD-10-PCS ODB58ZX, ODB18ZX, ODB28ZX, ODB38ZX). Patients with a diagnosis of HIV/AIDS (ICD-9-CM 042 or ICD-10-CM B20) were excluded. In addition, vulnerable populations such as minors (age less than 18 yrs. old), pregnant women, and prisoners were excluded. The control group was formed by patients who had endoscopic biopsies of the esophagus (according to ICD code and confirmed using endoscopy report) and did not have a diagnosis of EC (according to absence of ICD code diagnosis and absence of EC on histopathology report).
4. 3.6% patients were asymptomatic. What was the reason for performing endoscopy in these patients? How the authors excluded contaminants/non-significant isolates

- a. Response: Per endoscopy reports, the most common reason for endoscopy in patients without symptoms was for presence of anemia. There were a few cases listed as screening or surveillance.
 - b. Please see page 6 study population paragraph. The diagnosis of EC was confirmed with cytology or histopathology from brush or tissue biopsies of the esophagus. Patients without pathology results confirming the diagnosis of EC were excluded. Per the literature, brush or tissue biopsy has a greater than 90% sensitivity and specificity for the diagnosis of EC. Please see page 14, last paragraph as we have included in our study limitations: As patients had various indications for endoscopy, it is unclear whether the presence of candida on histopathology was consistent with a clinically significant infection.
5. Conclusion should be precise and carries relevant message. It should be revised.
- a. Response: Please see revised conclusion on page 15 according to your recommendation.

Response: On behalf of all authors, we appreciate your thoughtful review of our manuscript and hope our responses to your comments are well received.