Dear Reviewer,

Thank you for all your valuable comments and suggestions concerning our manuscript. We have taken all these comments into account in the revised version of the manuscript. We send a revised version of our manuscript.

We included the results of correlation, i.e. relation to LECT21 and fibroblast growth factor 21 (FGF-21) in the discussion. We have noticed that Willis et al. indicated that acute high-fat overfeeding augments circulating concentrations of FGF21, LECT2, and fetuin-A in healthy men (a new reference no. 35). We suggested that an opposite effect than in this subgroup may occur in patients with cirrhosis, with regard to correlation LECT2 and FGF-21.

In our study, the term "heavy alcohol consumption" was defined according National Institute on Alcohol Abuse and Alcoholism (NIAAA) guidelines as consuming more than 4 drinks on any day or more than 14 drinks per week for men and 3 drinks on any day or more than 7 drinks per week for women. We added this definition and a new reference (no. 22) concerning NIAAA guideline.

We also added the short explanations of two exclusion criteria: "> NYHA I" as "the slight or marked limitation of physical activity, ordinary physical activity results in fatigue, palpitation, dyspnea" and "> stage G2" as " the estimated Glomerular Filtration Rate (eGFR) < 60 ml/min" in the materials and methods.

In discussion we suggested that the low study numbers and decreased power test may cause lack statistically significant correlation beween AGT and cirrhosis progression in results of our study.

We transferred the sentence "The duration of alcohol abuse in the study group was on average 15.7 \pm 8.2 years in the Pugh-Child A + B subgroup and 18.7 \pm 8.3 years in the P-Ch C subgroup" from the discussion to the results. We corrected "FADL" to "NAFLD" (non-alcoholic fatty liver disease) in the discussion. Although our findings showed that "LECT2 may be used for the non-invasive diagnosis of alcohol-induced liver cirrhosis", we think that it is not possible stated whether this is specific to ALD. We suggest the need for further more extensive, including prospective, studies.

Yours sincerely,
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