

Response to reviewers' comments

1. The cases group is extremely small to come out with conclusion. This study better be performed as a multi-center and international.

Response: This study is about a rare disorder and recruitment of large numbers of patients from one centre is difficult. We were able to recruit our 50 patients from a tertiary care centre which allowed us to initiate this study. We draw attention to this fact in our conclusions. We are currently assessing the feasibility of expanding and carrying out a follow up study in different centres with our international colleagues in order to expand the number of participants.

2. The cases are under treatment of somatostatin which definitely can contribute to the GI symptoms. This is a major bias and I couldn't find any attention to this point in the methods or results sections.

Response: The requested information regarding somatostatin has been added to methods, results and discussion.

3. the controls are still from the hospital with pain after fractures. Most of them are under analgesias? after surgeries? This is very problematic control group.

Response: The main inclusion criterion for the age and sex matched control group was the absence of pre-existing chronic gastrointestinal disease, the presence of which may skew the findings. All the controls were included at the time of discharge from the fracture clinic, when use of analgesia, particularly regular use of opioid analgesia had reduced and updated information regarding use of medicines affecting the gastrointestinal tract was obtained. This has now been added to the manuscript.

4. Patient's and controls demographics are extremely poor.

Response: This has now been improved in the revised manuscript.

5. medication list is extremely poor.

Response: This has now been updated and improved in the revised manuscript.

6. Questionnaires used are validated in your population?

Response: Yes

7. how did you referred controls ? it was unclear from the manuscript if you actively interviewed controls for symptoms / ROME criteria? I think the methodology should be much more improved.

Response: All controls were interviewed face to face for filling out the ROME criteria and SF36 questionnaire.