

Reply to the Reviewer/Editor.

Dear Respected Editor/Reviewer

Good day

Thank you very much for the comprehensive review and the precious time you spent reviewing this study. We did the advised changes and answered the queries. All the changes were marked in red for easy tracking by the reviewer. The manuscript looks much better with these changes, and we tried to improve the language as we could. Thank you again for your precious assistance.

Here we are replying point by point:

Reviewer 1:

Thank you very much for your positive feedback and helpful suggestions.

The present manuscript addresses a relevant issue (including the group and type of diet studied), which is the role of diet in the therapeutic approach to IBS. Although it is difficult to assess the effects of long-term diet in these patients, the study presents an adequate methodology and significant differences when the two groups were compared.

I suggest that the study be continued, including a more significant number of cases and the variable intestinal rhythm and stool consistency (Bristol Scale) to better evaluate the diet in these patients.

Our Reply: Thank you very much, your suggestion is highly appreciated. It is a great idea. We will extend the study for more time with a more significant number. Thank you again for your suggestion.

Reviewer 2:

Besides studies with FODMAP diet, this study successfully investigated the effect of Mediterranean Diet on IBS sores and QoL. There are few typographic and methodological issues

Typo errors: Referrences, FGII ?

Our Reply:

Thank you very much for the precious time you spent reviewing the article. Also, we appreciate your supportive comments.

We corrected the Typo errors and highlighted them in red.

The cases were divided 50 each. An explanation is necessary about the method of grouping.

We added the grouping method to the manuscript and highlighted it in red.

How did the Celiac disease was excluded?

In the suspected cases with a positive history of intolerance to gluten foods, we requested the parents to eat foods containing wheat, consuming at least five slices of wheat bread per day (about 8 grams of gluten) for four weeks. At the end of this period, we performed assays for serum anti-transglutaminase IgA and IgG. With positive results, we screened those children with HLA typing. Cases with the well-established diagnosis were excluded from the beginning.

IBS-C and IBS-D have to be compared between groups; IBS-C vs. IBS-D in the MD group.

The discontinued group was tiny (3 patients) and were replaced by other patients. Their analysis will not provide the manuscript with any meaningful information different from the control group. Their information was incomplete.

LANGUAGE POLISHING:

Native English-speaker did language polishing

ABBREVIATIONS

The basic rules on abbreviations were strictly followed

EDITORIAL OFFICE'S COMMENTS:

All the editorial instructions were followed in finalizing this manuscript.

On behalf of all authors, we thank editors and reviewers for their support during the publication of this manuscript.

Many thanks

Professor Mohammed Al-Biltagi

Re-review comment:

The typo errors and few language issues have to be corrected. for example: " Group-I had 27 meals and 23 females.." meals should be "males"., "34.4±9.1 mo .." months (mo.) should be preceded. , etc.. Also uniformity of decimal usage, using abbreviations throughout the manuscript (MD,,..), Etc

Dear Respected Editor,

Good day I revised the manuscript and the tables and did the needed corrections of the typos as requested, and attached the corrected files.

Many thanks

Professor Mohammed Al-Biltagi