Author response letter

Dear reviewers,

Thank you so much for considering our research for publication in this eminent journal , all or your valuable comments were taken in consideration and here is the details of our revision to the manuscript

**Response to the reviewer Comments:**

**Reviewer1: (AA)**

1. the title asks about the relation, but your work was about the prevalence of cardiac dysfunction in patients with esophageal varies (you have no answer after your work if there was a relation or not)

In order to answer this valuable remark we had to add more statistical work to our manuscript. To confirm our aim and make it more clear,we've added a table ( table 7) and a figure (Fig 1) that shows the correlation between corrected QT interval and the degree of oesophageal varices . It shows a strong positive correlation between them. While no relashionship was found between oesophageal varices and echocardiographic parameters. These results was put down in a more clear way in the conclusion,results and discussion in the revised manuscript.

1. the aim of the study the word relates is un correct

The aim of the study was rewritten correctly.

1. conclusion: - you say that cardiac dysfunction in cirrhotic patients in the form of prolonged corrected QT interval is strongly related) and you neglect all other factors, such as clinical and Echo study, which must be discussed

Conclusion was rewritten in a more clear way to include other parameters.

 4-in exclusion criteria, you put diabetes as an exclusion criterion, but you have nine diabetic patients in (table 2) 3 in each group

 Regarding putting diabetes as an exclusion criterion , this was an unintended writing mistake , we did include diabeteic patients in our study whose diabetic state was considered controlled.We corrected this point and removed diabetes from the exclusion criteria as shown in the revised manuscript.

1. On pages 5 - 9th row, there is no reference to transthoracic ECHO cardiography

Refrence has been added.

6—In your discussion, you mention the references for and against your study, but you don't discuss their results, as in references 23-31-32-33.

A more detailed discussion has been added as shown in the revised manuscript.

7-reference s must be modified in writing.

Refrences were modified in writing.

8-table 1 must have a reference.

Refrence has been added.

9-In Table 4, you say two studied groups; which groups do you mean the table has no heading?

A heading has been added and the title has been modified ( control group , group with small varices , group with large varices).

**Reviewer 2: (AF)**

The result should be re-written as it is unclear, e.g. (group III and the other two groups (p-value <0.001), regarding the history of having previous episodes of upper GIT bleeding and the corrected QT interval. What does it mean?

the results have been re-written in a more clear way.

The grammar and punctuation marks should be rechecked.

The grammar and punctuation were rechecked.

Reasonable but routine laboratory investigations should be mentioned in detail.

Modification was done and the routine laboratory investigations that have been done to our patients were mentioned in the revised manuscript.

Your results should be compared with other studies in more detail; what was with you and what was against

Modification was done and a more detailed discussion was added , but some points such as the prolongation of QTc interval with upper GIT bleeding has no studies that goes against it according to our knowledge and this also was discussed in the revised manuscript.

**Reviewer3: (EF)**

**accept.**