Thank you to my dear editors and reviewers for your precious efforts and time and for helping me improve the quality of my paper. I want to send you my answers to all the questions the reviewers directed at me.  
  
All the recommended modifications were done in response to your comments in the attached file; all were modified and added to the main text and marked with (bold red lines).

I appreciate any help you can provide.  
  
**My answers to reviewer one comment are as follows:**   
**Thank you very much, my dear reviewer, for your precious, professional, valuable comments**  
  
U1.Start with full name HELICOBACTER PYLORI.   
A. Done (refer to the abstract of the main text)  
  
U2. Ninety  
A2. Done (refer to the abstract of the main text)  
  
U3. Group A (Before treatment) and Group B (After 1 month of treatment)?  
A3. Done (refer to the abstract of the main text)  
  
U4. Was the type of study cohort study, or what? Please describe.  
A. prospective cohort study (refer to the main text, methods section)  
  
U5. Either write the name of kits or instruments with no details or write the principle of reaction clearly  
  
A. complete blood count on Sysmex’s XN-Series hematology analyzers (dimension exl 200 Siemens), while all the biochemical markers use those biochemical reactions were done using dimension exl 200 Siemens (refer to the main text, methods section)  
  
U6. Add the name of the kit or its catalog number.  
A. Using HpSa enzyme immunoassay test kit (REF 10224 LOT 23-D5-276)  
  
U7. Add the unit after the resulting number, e.g., mg/dl, in all results.

A. Done (refer to the main text)  
  
U8. Explain the value of such a table. There is no positive finding in any group??????????????????????? Please remove  
  
A. already removed (refer to the main text, results section)  
  
U9. Correlation of group B could be merged in one table as in the added table labeled with yellow  
A. Done (refer to the main text, results section)  
  
U10. Revise the reference:

Kim N. Symptoms of Acute and Chronic H. pylori Infection. In: Buzas G, ed. Helicobacter pylori. Singapore: Springer Nature Singapore; 2014. p. 205-13  
  
A. done, (refer to the main text, discussion section)  
  
U11. Merge the sentence after the conclusion  
A. done, (refer to the main text, conclusion section)

**My answers to the reviewer's two comments are as follows:**   
**Thank you very much, my dear reviewer, for your precious, professional, valuable comments  
  
  
A- In the methodology:**

-1. The rationale behind studying H pylori and biochemical markers is very weak and represents only epidemiological rather than etiological linkAnswer: done, all the results were clarified- Many essential co-factors that affect these parameters were not studied, e.g., diet, chronic disease state, medications …etc, which makes conclusions unsafe  
  
ANSWER: thank you very much, my dear reviewer. I would like to tell you that all of these co-factors were already excluded (refer to exclusion criteria)  
Exclusion criteria:

1. All other causes of disturbed hematological parameters are excluded.

2. All causes of elevated liver enzymes and hyperbilirubinemia are excluded

(HCV, HBsAg, Autoimmune liver disease, etc..).

3. Patients who commenced on medications of H. pylori eradication therapy.

4. Other causes of dyslipidemia were excluded (diabetes mellitus, obesity, etc..)

2- How was H pylori confirmed in the current study? And why is the lab done immediately after treatment?

Answer: H.pylori was confirmed using H.pylori fecal antigen, and the lab was confirmed one month after treatment (refer to methods section in the main text )

- Why is there no relation between H pylori eradication and the changes in H pylori eradication in the current study? The absence of this excludes the etiological relation between H pylori and these biochemical changes  
  
Answer: refer to the results section in the main text  
  
  
B- In manuscript writing:

- Many typos

- Language errors

- Comments  
  
Answer: all those errors were corrected (refer to the main text)

- The results in the research article should be different from the thesis, e.g., not all non-relevant results are described, should be divided into sub-headings, e.g., patient characteristics, eradication rate, biochemical profile before and after H pylori treatment …etc

Answer: all of those errors were corrected (refer to the results section in the main text)

- The results should be focused on max. Six tables and 1-2 figures, i.e., concentrated results

Answer: all those notes were taken into consideration (refer to the results section in the main text)

- The discussion is feeble, and the presumed results of the current study should be compared with those of other studies

Answer: all those notes were taken into consideration (refer to the discussion section in the main text)

M1. Italic all through the article?  
A. done (refer to the main text).  
  
M2. How was the study group selected? (refer to the methods section in the main text)

A. This study will include two groups of individuals:

• Group A: 90 symptomatic individuals positive for H. pylori (H. pylori

fecal antigen positive) before treatment.

• Group B: the same individuals of Group A after one month of the end of

Treatment.

• The used regimen for treatment is levofloxacin-based

(levofloxacin+ amoxicillin + proton pump inhibitor).

Exclusion criteria:

1. All other causes of disturbed hematological parameters are excluded.

2. All causes of elevated liver enzymes and hyperbilirubinemia are excluded

(HCV, HBsAg, Autoimmune liver disease, etc..).

3. Patients who commenced on medications of H. pylori eradication therapy.

4. Other causes of dyslipidemia will be excluded (diabetes mellitus, obesity, etc..)

M3. All guidelines proposed 2 weeks of treatment; why was 1 month of treatment adopted?   
  
The treatment duration of our study was 2 weeks; meanwhile, the follow-up of laboratory tests was one month after treatment. (Mentioned in the methods section, main text)  
  
M4. Who is group A, and who is group B?  
• Group A: 90 symptomatic individuals positive for H. pylori (H. pylori

fecal antigen positive) before treatment.

• Group B: the same individuals of Group A after one month of the end of

treatment.

M5. Insert pylori?  
A. Done.  
  
M6. Please consider re-phrasing.

A.Done (refer to the main text)  
  
M7. Table 2 and Figure 1 are identical; hence, one should be omitted.  
A. Done (refer to the main text, results section)  
  
M8. Can it be deleted?  
A. Done (refer to the main text, results section)  
  
M9. Can we remove this column?  
A. Done (refer to the main text, results section)  
  
M10. Non-sense. This should be translated to eradication terms; the antigen's density cannot be correlated with biochemical changes.  
A. Done (refer to the main text, results section)  
The eradication rate of H. pylori infection after treatment was 77.8 %. Only 20 cases out of 90 were still positive for H. pylori fecal antigen.  
  
M11. No relation to the study?   
A. removed (refer to the main text, results section)  
  
M12. How did you get this conclusion? Please explain.  
A. Done (refer to the main text, discussion section)  
That was consistent with our study's results, as most of the patients included suffered from those symptoms, as seen in the symptoms table in the results section.  
  
M13. In data from your local community about levo resistance rates?  
A. H. pylori antibiotic resistance rates were as low as levofloxacin, 20% in Egypt, according to another study done by Mohamed M et al.   
  
  
M14. That is why it is better to add a control group matched for age and sex to check baseline biochemistry at the baseline.  
  
A. Both groups, group A (before treatment) and group B (after 1 month of treatment of patients of group A), are already matched for age and sex because they are the same individuals.  
  
  
**My answers to the reviewer's three comments are as follows:**   
**Thank you very much, my dear reviewer, for your precious, professional, valuable comments**Reviewer3: (AA)  
Please provide a point-by-point response to the comments in the attached file.

All the recommended modifications were done in response to your comments in the attached file (MS1)(A1, A2, A3, A4, A5, A6, U9, U10, U11)

Results and discussion cannot be evaluated until clarification of methods is done.  
  
How were 90 patients selected?  
  
A1. Relation or association?  
Relation (refer to the main text, abstract section)  
  
A2. Why may, based on your result, confirm or exclude?  
DONE (refer to the main text, abstract section).  
  
  
A3. Here, you state background, not result.  
Modification was done. (refer to the main text and introduction section).  
  
A4. Does this paragraph need paraphrasing?  
Modification was done. (refer to the main text and introduction section).  
  
A5. Objectives should include measurable outcomes, so use an action verb by which we can assess whether you achieve objectives or not! How can we assess insight?  
Modification was done. (refer to the main text and introduction section).

A6. This can be added in the conclusion, not here. Remove?  
  
Modification was done. (refer to the main text and introduction section).  
  
A7. Specify symptoms.  
Modification was done. (refer to the main text, methods section).  
  
A8. How sample size was calculated? How were patients recruited? What type of randomization was adopted?  
Sample size estimation

The Cochran formula calculates the essential sample size for the required precision, confidence level, and the estimated proportion of the attribute present in the population.

n = Z2× p× q/e 2

where

n is the sample size,

Z level of confidence according to the standard normal distribution (for a level of confidence of 95%, z = 1.96

e tolerated margin of error (10%)

p is the estimated prevalence of the disease

q is 1- p.

According to Abdelmonem et al., 2020, the Prevalence of Helicobacter pylori infection in Egypt was about 37%. So, according to the equation, the estimated sample size is 90 patients.

n = 1.962 × 0.37 ×0 .63 / 0.12 = 90 patients

Reference

Abdelmonem, M., Elshamsy, M., Wasim, H., Shedid, M., & Boraik, A. (2020). Epidemiology of Helicobacter pylori in delta Egypt. American Journal of Clinical Pathology, 154, S130.  
  
How were patients recruited? They were recruited from our patient clinic, Damanhur Fever Hospital.  
  
What type of randomization was adopted? We used simple randomization of this prospective cohort study.  
  
A9. It has not been given. Should it be used instead?  
Modification was done. (Refer to the main text, methods section).  
  
A10. How did you choose 90 patients and divide them into two patients, 90 each!!!!!!!!!!  
• Group A: 90 symptomatic individuals positive for H. pylori (H. pylori

fecal antigen positive) before treatment.

• Group B: the same individuals of Group A after one month of the end of

treatment.

(Refer to the methods section in the main text)  
  
  
  
A11. Fasting or non-fasting? How do you prepare patients before the analysis?  
  
Fasting for at least 12 hours.  
  
A12. Where is the data analysis section? Methods lack a lot of details.   
Modified (refer to the methods section in the main text)  
  
A13. Inappropriate test! You should use a test for paired data, not discrete groups.  
  
Removed (refer to results section).  
  
A14. Here, I felt confused! You follow up with the same patients or use different groups!!!!!  
 We followed the same patients as cleared in the methods and results section sections.  
  
• Group A: 90 symptomatic individuals positive for H. pylori (H. pylori

fecal antigen positive) before treatment.

• Group B: the same individuals of Group A after one month of the end of

treatment.