

Review Comments-Reviewer A

1) First, the title needs to clearly indicate the research methodology of this study, i.e., a cross-sectional analysis of the literature.

Reply 1: We are thankful for these comments from the Peer Reviewers. We have revised the title to “The Regularity of nourishing-yin prescription for treating ascites due to hepatitis B cirrhosis based on Data mining technology”. Thank you.

2) Second, the abstract is not informative and needs further revisions. The background did not indicate the clinical needs for summarizing the TCM prescriptions on ascites due to hepatitis B cirrhosis in the literature and the clinical significance of this research focus. The methods need to describe how the data on the TCM prescriptions were extracted from retrieved studies and key words used in the literature search. The results need to first report the results of literature search. The conclusion needs comments for the clinical implications of the findings.

Reply 2: We are thankful for these comments from the Peer Reviewers. We carefully checked and revised the abstract section.

1) We have revised the background (see Page 1, line 24-27).

2) About the question of how the data on the TCM prescriptions were extracted from retrieved studies, our team sorted out the data of the Yin nourishing prescriptions used in each article by reading the articles, and formed an excel table, that was, the prescription database. These belong to the detailed description of the method, which we have added in the methods section of the main text. We do not think this part needs to be covered in detail in the methods of the abstract. We appreciate your understanding.

3) In the results section, we have added the number of screened literature (see Page 2, line 36).

4) We have revised the conclusion (see Page 2, line 49-53).

3) Third, the introduction of the main text needs to have comments on the evidence-based efficacy and safety data of TCM for ascites due to hepatitis B cirrhosis because if TCM is not effective or safe, there is no need to perform this study. The authors need to further explain the clinical needs to summarize the TCM prescriptions for ascites due to hepatitis B cirrhosis; for example, in some traditional Chinese TCM guidelines such as Huangdi's Classic on Medicine, there has been standard TCM prescriptions for ascites, so what the clinical needs are of the focus on the prescriptions in the literature. The authors need to have comments on the feasibility of examining this by using literature search since not all related TCM prescriptions are available in the literature.

Reply 3: We are thankful for these comments from the Peer Reviewers. We have added relevant content in introduction as follow “In recent years, a large number of studies have proved that Chinese medicine has significant clinical effects and less side effects in the treatment of ascites due to hepatitis B cirrhosis, but the clinical ideas and medication habits of various scholars and physicians vary, and there are many experiences in the treatment of ascites due to hepatitis B cirrhosis, which are inconvenient to learn and pass on better.” (see Page 4, lines 98-103). Thank you.

4) Fourth, in the methodology of the main text, please consider to update the literature search till 2023, explain whether the search within online databases (CNKI and CSTJ) is adequate, for example many TCM prescriptions are provided in classical TCM guidelines and textbooks. Please describe the TCM theoretical basis for the development of the data collection form and please consider the assess the quality of the reporting of the TCM prescriptions in the included studies since this is important for the feasibility of this study and please consider collect data on the efficacy and safety, since this is clinically relevant. The authors must write the paper according to a reporting guideline that is suitable for this study.

We are thankful for these comments from the Peer Reviewers. Your comments will be very helpful in improving the quality of our manuscripts. We understand your concerns very well. However, the date of the search was a unanimous decision of our team. We believe that sufficient time is needed to conduct a series of studies after the literature screening. We focused on the medication patterns of various scholars and clinicians, and did not include prescriptions from classical TCM guidelines and textbooks, as explained in our added Inclusion criteria and exclusion criteria. The two databases we selected, China Journal Full Text Database (CNKI) and Chinese Science and Technology Journal Database (Wipu), are two of the more comprehensive databases of our domestic literature and basically contain the content of our study. We have added inclusion and exclusion criteria (see Page 5, lines 130-137) for the study literature as well as for the prescription drugs, which helped us in our screening of quality literature. Also we have added the reference (Pharmacopoeia of the People's Republic of China (2015 edition)) that was used in the development of the tables to build the database, which helped us to conduct the study under the guidance of the basic theory of TCM and ensure the feasibility of the study (see Page 6, lines 138-150). We appreciate your understanding.

Review Comments-Reviewer B

1. Figure 2A and Figure 2B

Please provide the descriptions of the x-axis and y-axis (also provide unit if applicable).

The horizontal and vertical coordinates of this figure have no practical significance. In medicine, what we care about is whether the formula has clinical significance and

whether it can explain the meaning of the formula. Without looking at this coordinate.

2. Table 4

Please provide the meaning of “XXX”?

573 **Table 4** The associations of herb combinations in prescriptions (confidence level ≥ 0.76)

Order	Associations	XXX	Confidence level
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We have modified it.

3. Ref. 5 is the same as Ref. 16. Please check and revise.

We have modified it.

4. The information of Ref. 20 in the main text differed from the information in the reference list. Please revise.

283 long time, causing liver damage. Zheng et al. showed that HBV damaged and consumed
284 body liquid, causing hepatic yin injury (20). The kidney is a water viscus, with the

20. Zheg GY, Miao JQ, Chen Z, Ling Changquan's experience in syndrome differentiation and treatment of chronic hepatitis B. Journal of Traditional Chinese Medicine 2014;55:975-6.

We have modified it.

5. The authors mentioned “studies...”, while only one reference was cited. Change “Studies” to “A study” or add more citations. Please revise. Please number references consecutively in the order in which they are first mentioned in the text.

305 Related studies have revealed that, compared with Western medicine, the treatment of
306 TCM for ascites due to hepatitis B cirrhosis has clear advantages (25).

We have modified it.