Dear reviewer:
Thanks for your efforts and comments. We have revised the manuscript accordingly. Please see our point to point responses below.

Reviewer 2
Comments and Suggestions for Authors

An interesting study addressing the role of miR-146a-5p in the PsA pathogenesis by comparing the levels of mir-146a-5p in peripheral CD14+ 2 monocytes in a small group of 34 patients with active PsA patients compare to controls and in comparison to the clinical response in the PsA group as well.

In this aspect the study design and results meet its aims but it does not prove the role of miR-146 as a biomarker. The study population did not include other inflammatory arthritis as rheumatoid arthritis in one hand or psoriasis without arthritis in the other hand. Therefore the article title, discussion and conclusion should be revised.

Response:
Thanks for the comments. The title has been replaced to avoid the use of diagnostic biomarker. In addition, patients with psoriasis without arthritis (n=17), two more small groups from RA and AS (n=3 and 3, respectively) were used to compare their expression levels of miR-146a-5p in PsA and in NCs. The title has been replaced as ‘’MiR-146a-5p expression in peripheral CD14+ monocytes from patients with psoriatic arthritis induces osteoclast activation, bone resorption, and correlates with clinical efficacy’’. The sections of discussion and conclusion are also revised.

The correlation to disease activity is limited to the improvement in joint disease only as measured by ACR 20 and not to the other manifestations of the disease as PASI, enthesitis etc. If data is available it will interesting
to assess the changes in mir 146 in correlation to those parameters or to the minimal disease activity (MDA) score as well.

Response:

Thanks for the useful comments. Unfortunately, we do not have MDA score available, however, we do have PASI and presence of enthesitis. The association was analyzed in 34 patients with PsA and 17 patients with PsO. The result showed R Square in PsA and PsO patients is 0.17(p=0.08) and 0.07(p=0.50), respectively (Figure 5B), indicating a non-association of miR-146a-5p expression with PASI severity score in patients with PsA or PsO. Finally, we ask whether PsA patients with enthesitis would have an increased expression of miR-146a-5p expression. The expression of miR-146a-5p was measured in 12 PsA patients with enthesitis and 22 PsA patients without enthesitis. The result showed the expression of miR-146a-5p in patients with or without enthesitis was similar (p=0.35) (Figure 5C). Please refer to Figure 5B and 5C (P23).
We hope that the revised manuscript in its current form is of general interest for the readers and is appropriate for publication in *Journal of Clinical Medicine*.

With best regards,

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