**Answers to the reviewers**

**Revisor A**

Thank you for your comments. They were extremely valuable for the correct growth of this manuscript. We hope to have answered all your notes. Our answers in the text are written in red.

**1 – Abstract • Introduction • on the introduction, a clarification must be performed to match the study objectives because, it induces the reader that only
executive functioning was assessed.**

In the “Abstract” instead of “executive functions” we changed for “neuropsychological profile”. In the second paragraph, of the English version, we made 2 sentences because the original sentence was too long.

In the “Introduction” in the second, third, fourth, fifth and ninth paragraphs, we also made 2 sentences from the original sentences because the original sentences were too long.

We added 3 sentences to the “Introduction”. We tried to show that the objectives of the present study are not only for the executive functions, but also for the study of attention, memory and emotional distress:

1)“Anxiety and depression are also highly prevalent in obesity with recent clinical findings suggesting the possibility of shared pathophysiological pathways between these conditions and their influence on memory performance across a lifespan”

2)“In the latter case, it is necessary to improve the susceptibility to distraction by food cues and the regulation of food intake and reward, characteristics consistently linked to reduced attention and memory functions in obese patients”

3)“We focused on attention, memory and executive functions due to their impact on general cognitive functioning and emotional control”.

**2 - • Discussion • this entire section should be rewritten. Authors are just
describing some results again, which are then repeated on the conclusions.
Please, use some ideas from the text (discussions section), where contrasts
are emphasized and criticized.**

We rewrite the entire section of discussion and conclusion.

In the conclusion we tried to highlight the principal ideas:

1) We found a weakening in cognitive performance of severely obese patients.

2) Ageing, low CR and risk factors have an important role in the cognitive decline.

3) Psychological intervention that address self-control strategies must focus specially on older and less educated patients.

4) Interventions should have the collaboration of other “institutions” like schools, and families regarding the avoidance of food stimuli and the promotion of healthy habits.

5) Our daily practice should consider the use of other measurements instead of only the BMI because they provide useful information about fat distribution and comorbidities. 6) Women show an expressive presence of emotional distress.

7) It is important to consider that men and women have different thoughts, feelings and perceptions of their own bodies. Probably they need different approaches regarding weight loss management.

**3- Grammatical Errors • There are some grammatical errors in the text (page 7):
“Women presented higher medians for distress measurements namely…”
-        Should not be higher “means”? Please, use “means”
instead of medians to report mean values.**

In the “Results” section, we changed “medians” by “means”.

**4 - Standardization • Please, standardize the “n” in the text. Sometimes is (n = 72) and sometimes (n=75).  When sample or sub-samples are described use the same
nomenclature to report it. See page 9.**

On page 9 we put in red and standardized the value of RCF (*n*=72) and (*n*=75)

**5 - Sentences length • some sentences are too long. I know that in Portuguese we don´t have this issue. However, in scientific/academic English, shorter sentences are required. Please, use only one or two themes by sentence.**

We tried to make shorter sentences at the discussion and conclusion section.

**Revisor B**

Obrigada pelos seus comentários.

Foram extremamente valiosos na realização deste artigo.

Tal como sugerido, reformulamos a tabela 4 pois também estamos de acordo que a modificação vem facilitar a sua leitura e interpretação.