

ANSWERING REVIEWERS



November 26, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 14610-edited.doc).

Title: The characteristics of gastric cancer in peptic ulcer patients with *Helicobacter pylori* infection

Author: Jae Jin Hwang, Dong Ho Lee, Ae-Ra Lee, Hyuk Yoon, Cheol Min Shin, Young Soo Park, Nayoung Kim

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 14611

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

Reviewer No: 01433781

(1) In the discussion section: I guess this sentence need to be fixed: Whereas patients with DU have been reported to develop H. pylori infection at rates almost as high as GU patients [28], their risk of developing of GC is significantly lower [7].

Answer: Thank you for the reviewer's comment. We fully agree with the reviewer's comment. We removed this sentence because the reviewer noted that it was unclear.

(2) There are several grammar mistakes that need to be corrected

Answer: Thank you for the reviewer's comment. We got the manuscript corrected by professional English language editing company.

Reviewer No: 02542141

(1) number of failure of HP eradication is surprisingly high (GU 59.4%, DU 51.4%), why?

Answer: Thank you for the reviewer's comment. Because of the retrospective design of this study, we could not fully elucidate the cause of the failure to eradicate *H. pylori* in each patient. We commented on this limitation in the Discussion section.

(2) After failure of HP eradication, any attempt to eradicate HP with second or third line antibiotics? and why not? Since HP is known to be carcinogen, and studies showed that HP eradication successfully decrease the development of recurrent ulcers. Should patients with ongoing HP infection be treated?

Answer: Thank you for the reviewer's comment. We attempted to eradicate *H. pylori* infection with rescue therapy. However, the eradication therapy was not successful in most patients because of either poor compliance or adverse events. In addition, the patients did not want to eradicate *H. pylori* infection despite our efforts to educate them regarding the disease. We added a paragraph on esophagogastroduodenoscopy and *H. pylori* infection in the Materials and Methods section.

(3) Could authors also compare patients between success HP eradication and failure HP eradication (on going HP infection), and associate with incidence of developing gastric cancer (in both GU and DU).

Answer: Thank you for the reviewer's comment. Because of the retrospective design of this study, we could not fully evaluate association with incidence of developing gastric cancer in both GU and DU, and comparison of patients between success *H. pylori* eradication and failure *H. pylori* eradication. We commented this limitation in the Discussion section.

(4) Did authors have data re: the proportion of patients having HP infection when first diagnosed GU and DU.

Answer: Thank you for the reviewer's comment. Because of the retrospective design of this study, we could not fully investigate the proportion of patients having *H. pylori* infection when diagnosed GU and DU. We commented this limitation in the Discussion section.

(5) Did patients in the study take any NSAIDs/Aspirin which could be contributing to higher incidence of GU/DU (HP infection + NSAIDs use has higher risk of developing GU/DU than pt with HP infection alone or using NSAIDs alone)

Answer: Thank you for the reviewer's comment. Because of the retrospective design of this study, we could not fully investigate history of drug intake (NSAIDs or aspirin) in each patient. We commented this limitation in the Discussion section.

(6) If authors did not have data I mentioned, I believe this should be mentioned in limitations of the study.

Answer: Thank you for the reviewer's comment. Because of the retrospective design of this study, we could not fully elucidate the data the reviewer mentioned. We commented this limitation in the Discussion section.

3 References and typesetting were corrected

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

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