

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 53351

**Title:** Chemoprevention of Gastric Cancer Development after Helicobacter pylori Eradication Therapy in an East Asian Population: Meta-Analysis

**Reviewer's code:** 03270609

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Professor

**Reviewer's country:** Russia

**Author's country:** Japan

**Manuscript submission date:** 2019-12-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2019-12-19 17:26

**Reviewer performed review:** 2019-12-22 21:08

**Review time:** 3 Days and 3 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

The article is devoted to an important problem - the advisability of the eradication therapy (ET) administration in patients with atrophic gastritis and with gastric cancer (GC) who have already undergone endoscopic resection. The importance of the study is due to the fact that in the scientific community debate continues about the need for ET in these groups of patients. Opponents substantiate their opinion that the preventive effect of ET is possible only at the stage of acute or hypertrophic gastritis, while in the cases of atrophic gastritis or in the cases of stomach cancer, therapy not only does not reduce the risk of GC, but, on the contrary, can increase the risk of proximal gastric cancer. In the submitted manuscript, the authors, based on the results of a meta-analysis, show that in the East Asian population, *H. pylori* eradication effectively reduced the risk of gastric cancer, irrespective of past history of previous cancer. They also discuss the issues related to the identification of risk groups for the development of GC in this category of patients and recommendations for optimizing ET.

**Comments**

**Abstract** Data on the incidence of GC in the group of patients after endoscopic resection are not presented.

**Introduction** Incorrect phrase: - .. *Helicobacter pylori* infection of gastric mucosa for long periods.

**Results** General remarks: In the text of the manuscript, you must provide links for each group of studies. For example, ... (4 RCTs [?] and 12 cohort studies[?]) in patients with gastritis alone and 22 studies (4 RCTs [?] and 18 cohort studies [?]) in patients after resection for gastric cancer. Due to the fact that Cho S et al [24] studied only the effect of ET on the severity of atrophy and intestinal metaplasia of the gastric mucosa, it cannot be included in a meta-analysis. Also, studies of Lim JH et al [24] (it is not related to the study of the incidence of GC after endoscopic submucosal dissection) and Uemura N et al [30] (it is not related to the study of the ET effect on the incidence of GC) should be excluded from the meta-analysis. The sentence "Five studies included

cases with both gastric cancer and dysplasia [5, 14, 17, 21, 22]. “- unclear. It is not clear what the authors want to say. In the studies by Jung S, et al [17], Kwon Y et al [21], and Chung CS et al [22], the patients only with early gastric cancer were included. The authors did not note that in a number of studies, the effect of ET was evaluated in patients not only with gastritis, but also with gastric adenoma (Saito K et al [29]), as well as in patients with gastric ulcer (Mabe K et al [35] and Take S et al [40]). The authors should also point out that in a number of studies there were no differences in the incidence of metachronous cancer in patients with or without ET, for example, in studies by Maehata Y et al [11], Kato M et al [13], Kim SB et al [19], Ami R et al [20]. It is also advisable for the authors to note that in a number of studies it was shown that the prophylactic effect of ET was not observed in all groups of patients, but only in some ones. For example, this was shown in the studies of Wong BC et al [25], Mabe K et al [35], Yanaoka K et al [35]). These data seem important, since they indicate the need for a differentiated approach to the administration of ET in different cohorts of patients. Literature search and data extraction Noteworthy is the large difference in the incidence of GC in the cohort and randomized trials (for gastritis: in RCTs and cohort studies -272.7 (180.4–322.4) and 467.2 (68.7–1379.5) per 100,000 person-years and for cancer: 1790.7 (406.5–2941.2) and 3117.9 (701.3–10 166.0) This may be due to the fact that the compared groups were very heterogeneous in age and sex, that could affect the results obtained. I believe that this issue can be considered in the discussion. Meta - analysis of gastric cancer risk in treated groups and untreated control group The authors provide very low data on the incidence of metachronous GC in patients after endoscopic resection: 0.060% among treated individuals, and 0.073% among the H. pylori-positive control groups. This data should be double-checked !!! Subgroup analysis by different countries and observation periods The authors in the discussion should consider why there is a very big difference in the risks of developing GC in different countries. The RR

of the Japanese studies was 0.33 (95% CI: 0.25–0.45), which was lower than that from China (0.72; 0.52–0.99) and Korea (0.51; 0.06–4.58) Discussion. "This meta-analysis showed that 25.0% of patients in 4 RCTs and 58.3% in 12 cohort studies in East Asian populations with gastritis alone had significant reduction in gastric cancer risk, with mean RRs of 0.67 (95% CI: 0.47–0.96) in RCTs and 0.39 (0.30–0.51) in cohort studies. " - It is not clear where such conclusions come from (25% and 58.3% ???): There are a number of grammatical errors, for example page 9 (treatedted).

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
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- ☐ Plagiarism
- ☐ No

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 53351

**Title:** Chemoprevention of Gastric Cancer Development after Helicobacter pylori Eradication Therapy in an East Asian Population: Meta-Analysis

**Reviewer's code:** 00052643

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Associate Professor

**Reviewer's country:** Italy

**Author's country:** Japan

**Manuscript submission date:** 2019-12-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2019-12-17 11:00

**Reviewer performed review:** 2019-12-23 08:36

**Review time:** 5 Days and 21 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

"Chemoprevention of Gastric Cancer Development after Helicobacter pylori Eradication Therapy in an East Asian Population: Meta-Analysis" is an interesting paper. I think authors had well developed and discussed the theme. However I found some difficulties in understanding statistical analysis, probably due to layout problems (please remedy). Finally in the "High-efficacy eradication therapy and eradication regimens" paragraph, I suggest authors to cite also recent therapies such as Rifabutin (see Ribaldone et al. Journal of clinical medicine 2019).

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

- ☐ The same title
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- ☐ No

### ***BPG Search:***

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**Reviewer's code:** 03731607

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Assistant Professor, Surgical Oncologist

**Reviewer's country:** United States

**Author's country:** Japan

**Manuscript submission date:** 2019-12-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2019-12-17 17:53

**Reviewer performed review:** 2019-12-24 13:44

**Review time:** 6 Days and 19 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
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publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
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			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No



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**https://**[www.wjgnet.com](http://www.wjgnet.com)

## **SPECIFIC COMMENTS TO AUTHORS**

The authors submit a meta-analysis of RCT and cohort studies evaluating h. pylori status and eradication in two populations of patients those with gastritis and those with previous gastric cancer resection. The authors specifically evaluated the Asian population. This is an important topic the results may influence national healthcare policies such as h. pylori screening and treatment. However, I am not sure what the current meta-analysis offers over the three previous meta-analysis recently published. The conclusions appear to be the same. Perhaps the authors can help explain to the readers what incremental knowledge is gained from this study compared to previously published results 1) I did not see a PRISMA flow diagram for meta-analysis as a figure. If not submitted please make a flow diagram to be transparent in what studies were included and excluded 2) several of the included trials included patients with gastric ulcer and adenoma and not just gastric cancer. Other studies that were included primarily evaluated intestinal metaplasia and not the incidence of gastric cancer. Either these studies should be excluded or the inclusion criteria broadened and the results conclusion modified to disclose that this patient population was included 3) Do the authors have any hypothesis why some studies suggest a benefit and others not or in subsets of patients only. does timing of eradication of h. pylori matter? Does sex or age matter? Are other risk factors more important? What are the implications of this study. Not just that more studies need to be done but what do the authors recommend we do with this. Should all patients with gastritis and previous gastric ulcer, adenoma and cancer be screened for h. pylori and treated? 4) there was a great deal of grammatical errors that made it hard to follow and understand what the authors were trying to convey 5) Lastly, some of the numbers did not seem consistent across the study. For example there was a statement about the extremely low risk of metachronous gastric





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cancer being <1% yet one of the conclusions was that 25% and 58% of patients experience a reduction in risk of gastric cancer. These numbers seem to be at odds and do not seem to be consistent with previous data and the data presented within the manuscript

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
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- ☐ Plagiarism
- ☐ No

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** World Journal of Gastroenterology

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**Title:** Chemoprevention of gastric cancer development after *Helicobacter pylori* eradication therapy in an East Asian population: Meta-analysis

**Reviewer's code:** 00052643

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Associate Professor

**Reviewer's country:** Italy

**Author's country:** Japan

**Manuscript submission date:** 2019-12-16

**Reviewer chosen by:** Le Zhang

**Reviewer accepted review:** 2020-03-20 09:16

**Reviewer performed review:** 2020-03-20 09:29

**Review time:** 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
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publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
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			Conflicts-of-Interest:
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			<input type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

"Chemoprevention of Gastric Cancer Development after Helicobacter pylori Eradication Therapy in an East Asian Population: Meta-Analysis" is an interesting paper. Authors have discussed the matter in a precise, detailed and methodical way. Previous asked modifications have been made.

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##### ***Google Search:***

- ☐ The same title
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- ☐ Plagiarism
- ☐ [ Y ] No

##### ***BPG Search:***

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- ☐ [ Y ] No

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**Reviewer's code:** 03270609

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Professor

**Reviewer's country:** Russia

**Author's country:** Japan

**Manuscript submission date:** 2019-12-16

**Reviewer chosen by:** Le Zhang

**Reviewer accepted review:** 2020-03-20 03:06

**Reviewer performed review:** 2020-03-22 13:03

**Review time:** 2 Days and 9 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input checked="" type="checkbox"/> Onymous
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			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

There are no comments on the finalized manuscript.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

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**Reviewer performed review:** 2020-03-20 09:29

**Review time:** 1 Hour

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#### **SPECIFIC COMMENTS TO AUTHORS**

"Chemoprevention of Gastric Cancer Development after Helicobacter pylori Eradication Therapy in an East Asian Population: Meta-Analysis" is an interesting paper. Authors have discussed the matter in a precise, detailed and methodical way. Previous asked modifications have been made.

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- ☐ Plagiarism
- ☐ [ Y ] No

##### ***BPG Search:***

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<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
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<input checked="" type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input checked="" type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
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#### **SPECIFIC COMMENTS TO AUTHORS**

There are no comments on the finalized manuscript.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
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**Professional title:** Assistant Professor, Surgical Oncologist

**Reviewer's country:** United States

**Author's country:** Japan

**Manuscript submission date:** 2019-12-16

**Reviewer chosen by:** Le Zhang

**Reviewer accepted review:** 2020-03-26 20:34

**Reviewer performed review:** 2020-03-26 20:45

**Review time:** 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
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#### **SPECIFIC COMMENTS TO AUTHORS**

I believe the manuscript is ready for publication now

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- ☐ No

##### ***BPG Search:***

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