

## No. 1

**Specific Comments To Authors:** This review on the treatment strategies and methods of prevention of eradication failures of anti-*Helicobacter* regimens has important drawbacks, as follows: - The authors have written a confusing paper, in which there are too many ideas and few experimental findings. Moreover, the sequence of concepts is not clear for the reader - The main problem in assessing the results of eradication therapy is represented by the antibiotic resistance, in particular claritromycin resistance. The authors do not mention the level of CLA resistance, which permits to predict a positive eradication in both western countries and in China. - According to the presence of high rates of CLA residence, the actual trend is towards the use of quadruple instead of triple therapy and to prolong the duration of every eradication scheme (10-14 days). These aspects are not discussed in the review. - In order to render the paper more clear, the authors should distinguish between non-bismuth and bismuth quadruple regimens - Moreover, the attention should be addressed to describing first-line therapies and then second- and third-line schemes in case of eradication failure of the first attempts - Antibiotic susceptibility tests are not practical in daily clinical practice and consequently they are poorly used - Some statements are highly questionable (x-ray documentation of gastric damage in Hp+ patients and association between Hp and diabetes). - Furazolidone is poorly used in western countries and produces important adverse events - Natural Chinese products can be interesting, but there are no clinical trials assessing their efficacy in comparison with traditional regimens in daily practice

Scientific Quality: Grade E (Do not publish)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Rejection

**1.This review on the treatment strategies and methods of prevention of eradication failures of anti-*Helicobacter* regimens has important drawbacks, as follows: - The authors have written a confusing paper, in which there are too many ideas and few experimental findings.**

**Answer:**We think that this is a review paper, it is better for comprehensive analysis of the current research. Finally, we have added the conclusion part, our point of view is prevention and treatment with traditional Chinese medicine.

**2.The authors do not mention the level of CLA resistance.**

**Answer:**The world health organization listed CLA-resistant HP as one of the 12 pathogens in urgent need of new antibiotics in 2017. *Helicobacter Pylori* resistance is very serious, We've already said, this is a consensus issue, so no specific data are given.

**3.In order to render the paper more clear, the authors should distinguish between non-bismuth and bismuth quadruple regimens - Moreover, the attention should be addressed to describing first-line therapies and then second- and third-line schemes in case of eradication failure of the first attempts .**

**Answer:**This section has been supplemented in "3.2.2.1 Adjusting standardized medication".

**4.Antibiotic susceptibility tests are not practical in daily clinical practice and consequently they are poorly used.**

**Answer:**It is used in patients with severe drug resistance, and the rapid sensitivity testing is already being tried in Jiangsu and Zhejiang provinces China.

**5.Language Quality**

**Answer:**We've revised it.

**No. 2**

**Specific Comments To Authors:** The manuscript, no. 53591, according to the authors, presents the review of the current status and the progress in the approaches used in prevention and treatment of the drug-resistant Hp. While, the manuscript promotes rather extensively the use of traditional Chinese medicine, only few factual data are provided. Also, the long list of variety of claims made by the authors are not supported by the literature references. Another shortcoming of this paper is the total omission of the natural products and agents affecting TLR4 activation by Hp., as well as those affecting MAPK and IKK cascades(see Inflammopharmacology vol.27; 2019: 203-2011).

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

**Answer:**We have made corrections and adjustments to the references, and revised the language polishing

**No. 3**

**Specific Comments To Authors:** The topic is important and current. It would be very interesting and useful to include in the review a section an emphasis on differences between children and adults regarding treatment and resistance to antibiotics.

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments To Authors (File):

**Answer:**We have revised the language polishing