



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 80125

Title: Rifabutin as salvage therapy for Helicobacter pylori eradication: Cornerstones and novelties

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 03727416

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor, Attending Doctor, Chief Doctor

Reviewer’s Country/Territory: Taiwan

Author’s Country/Territory: Italy

Manuscript submission date: 2022-09-17

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-18 12:37

Reviewer performed review: 2022-09-26 14:27

Review time: 8 Days and 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

Peer-reviewer statements	Peer-Review: [<input checked="" type="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

In this study, Borraccino AV et al. reviewed the application of Rifabutin as a salvage therapy for H. pylori eradication failure. They reported some combinations for H. pylori eradication, such as rifabutin with amoxicillin or tetracycline, added on novel acid suppressor drugs, vonoprazan. The side effects of rifabutin and the risk of drug resistance Mycobacterium tuberculosis were also reviewed when rifabutin-based regimens for H. pylori eradication. Their review was comprehensive and confluent for readers. I only have one comment: In view of gut microbiota change following H. pylori eradication antibiotic usage, the author may add some information about the change of gut bacterial diversity after rifabutin usage for H. pylori eradication. Minor correction: In page 5, the text “ Twenty-one studies were included, and the overall eradication rate was 70,4 by intent-to-treat (ITT) and 72.0% by per-protocol (PP) analyses.” “70,4” may be corrected into 70.4%.



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Reviewer's Country/Territory: China

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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SPECIFIC COMMENTS TO AUTHORS

Helicobacter pylori eradication has become a worldwide challenge for clinicians today due to increasing H. pylori antibiotic resistance. In this review, the authors summarized current evidence about traditional triple therapy containing amoxicillin and rifabutin as salvage therapy, based on the most recent meta-analyses. In addition, some other novelties regarding rifabutin based regimens have been described in detail. It is an interesting mini-review. in which the mechanism of action, pharmacodynamics and pharmacokinetics of rifambutin, H. pylori resistance to rifambutin, the efficacy and side effects of rifambutin based regimen have been detailed respectively. In addition, the precautions before and after starting a rifabutin-based eradication regimen were also detailed. However, there are still some flaws in this manuscript that need to be further improved: 1. The syntax of some sentences is not standard, such as the second paragraph of page 2. 2. Grammatical errors in some statements, such as paragraph 3 and paragraph 4 of the page 5. 3. Abstract and conclusions are not concise enough.