

## PEER-REVIEW REPORT

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

**Manuscript NO:** 90507

**Title:** Laryngopharyngeal reflux disease: Updated examination of mechanisms, pathophysiology, treatment, and association with gastroesophageal reflux disease

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 06520721

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Assistant Professor, Doctor

**Reviewer's Country/Territory:** Brazil

**Author's Country/Territory:** China

**Manuscript submission date:** 2023-12-22

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-12-26 09:34

**Reviewer performed review:** 2024-01-07 02:03

**Review time:** 11 Days and 16 Hours

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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

This comprehensive review provides a thorough examination of laryngopharyngeal reflux disease (LPRD), encompassing its pathophysiology, clinical manifestations, diagnostic methods, and treatment strategies. The author delves deeply into the etiology of LPRD, covering both reflux and reflex theories, as well as its associations with other respiratory conditions. Additionally, the article intricately describes the relationship between LPRD and gastroesophageal reflux disease (GERD), emphasizing its role as an extra-esophageal manifestation of GERD. The pathophysiology section meticulously dissects the mechanisms of injury to laryngopharyngeal tissues by different reflux substances such as hydrochloric acid, bile, gastric enzymes, among others. However, when discussing treatment methods, the article could delve more into recent research advancements and future therapeutic trends. The mention of surgical interventions is relatively limited, and a more extensive exploration of the latest studies and developments might provide readers with additional information on treatment options.

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**Reviewer's code:** 06520070

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Doctor, Research Assistant

**Reviewer's Country/Territory:** New Zealand

**Author's Country/Territory:** China

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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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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<b>Scientific significance of the conclusion in this manuscript</b>	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

This review extensively covers the pathophysiology, clinical features, diagnosis, and treatment of LPRD, offering readers a comprehensive and in-depth understanding. The author employs a wealth of research data and literature references, enhancing the credibility and reliability of the article. The elucidation of different perspectives on the etiology of LPRD, such as reflux and reflex theories, is particularly clear, aiding readers in comprehending the diversity and complexity of LPRD. To further enhance the article, consider incorporating concise examples or case studies to illustrate practical aspects, particularly in the diagnosis and treatment sections. Others, there is a relatively limited discussion on future research directions and development trends in LPRD towards the end of the article. Further research avenues could include the development of novel treatment strategies, a deeper exploration of etiology, and the advancement of more accurate diagnostic methods. Providing insights into these aspects could offer readers a clearer understanding of the future developments in the field of LPRD. Overall, this review provides a valuable and detailed exploration of LPRD, contributing substantially to the understanding of this complex medical condition.



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