September 2, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 20400-Revised manuscript.doc).

Title: First-line eradication for Helicobacter pylori-positive gastritis by esomeprazole-based triple therapy is influenced by CYP2C19 genotype

Author: Yoshimasa Saito, Hiroshi Serizawa, Yukako Kato, Masaru Nakano, Masahiko Nakamura, Hidetsugu Saito, Hidekazu Suzuki and Takanori Kanai

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 20400

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

Response to Reviewer 1(#503623)

We thank the reviewer for these valuable comments that have been extremely helpful in improving the quality of our manuscript. We have addressed these concerns and denoted the revisions in red in the revised manuscript.

This study is a single-arm study of Esomeprazole-based triple therapy in patients with *H. pylori*-positive gastritis. When the sample size is 67, a two-sided 95.0% confidence interval for a single proportion using the large sample normal approximation will extend 0.100 from the observed proportion for an expected proportion (*H. pylori* eradication rate) of 0.700. For this reason, we consider that the sample size (80 participants) is sufficient in this

study. However, as the reviewer indicated, further studies are necessary in a large population of patients in different countries before an accurate correlation between the EPZ-based therapy and CYP2C19 genotype is completed. In accordance with the reviewer's comment, we have revised the Discussion section.

Response to Reviewer 2(#68891)

We thank the reviewer for these valuable comments that have been extremely helpful in improving the quality of our manuscript. We have addressed these concerns and denoted the revisions in red in the revised manuscript.

In accordance with the reviewer's comment, we evaluated *H. pylori* eradication rate by intention-to-treat (ITT) and per protocol (PP), and revised the Results and Discussion sections. As the reviewer indicated, further studies are necessary in a large population of patients in different countries before an accurate correlation between the EPZ-based therapy and CYP2C19 genotype is completed. We have revised 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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