

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Pharmacology and Therapeutics

Manuscript NO: 31187

Title: Phage therapy: An alternative to antibiotics in the age of multi-drug resistance

Reviewer's code: 00012309

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Date sent for review: 2016-11-18

Date reviewed: 2016-11-25

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

This is an informative and well presented review. Current literature contains a few hints at the use of phages as "biocontrol tools", namely to try and lower the entering of bacteria into the food chain. Would the Authors consider it worth to spend a few words on this issue?

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Pharmacology and Therapeutics

Manuscript NO: 31187

Title: Phage therapy: An alternative to antibiotics in the age of multi-drug resistance

Reviewer's code: 00504975

Reviewer's country: Saint Kitts and Nevis

Science editor: Fang-Fang Ji

Date sent for review: 2016-11-18

Date reviewed: 2016-11-29

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Review: Phage therapy: An alternative to antibiotics in the age of multi-drug resistance

The authors provide a historical perspective on the use of phages as antibacterial agents and discuss some of the advances in phage therapy with a focus on multidrug-resistant infections and its potential application to human medicine. The majority of the manuscript is well written and I only have minor comments for the authors as stated below. Page 4. "... 262.5 million treatment courses prescribed in 2011 alone (842 prescriptions per 1000 persons) and 25,000 tons of antibiotics used between medicine and agriculture each year" Are these numbers for the USA? Please clarify. Page 5. "... regulatory organizations such as the CDC and WHO have declared antibiotic resistance a global crisis." Consider citing a reference to support this statement. Page 5: "In the years of 1983-1987, there were 16 new pharmaceutical antibiotics approved by the FDA for use in the US, this number has steadily trended downwards and between 2003-2007 only 5 new antibiotics were approved" Can you please provide more current information, let's say for the last 9-10 years (i.e., 2006-2016)? Page 6: "the greatest and

most urgent global risk." Please provide a reference to support this statement. Page 6: ... "which are the most numerous members of Earth's biosphere." Please delete, it was already mentioned at the beginning of the introduction. Page 10: In the first line it reads "hampster" instead of "hamster". Please amend. Page 12: Consider citing a reference to support the statement in the first half of the first paragraph: "Two major protein classes... allowing the lysin proteins to access and hydrolyze the cell wall." Page 12: *A. baumannii* is mentioned for the first time, please indicate the genus in full for this microorganism. Page 13: The percentage numbers in "...cleared infections in 92% of mice, whereas a combination of 3 previously identified lysines achieved only an 80% survival rate" are irrelevant without knowing the total number of animals or if the differences (92% vs. 80%) were significant. Page 13: "*S. Aureus*" should be *S. aureus*"; it happened twice. Page 14: Cited references at the end of the first paragraph reads "[70-62]", should it be "[70-72]"? Please amend. It seems that the section "PHAGE THERAPY VERSUS ANTIBIOTIC THERAPY" would have been written by a different person. Consider reediting some of the paragraphs. Page 15: Please review grammar for "an host" and "an healthy". Page 15: Please delete "The researchers" from "The researchers Tetz and Tetz..." Page 17: Please delete "at the Eliava Institute of Bacteriophages in Tbilisi, Georgia". Abbreviations Although some abbreviations are commonly used worldwide and do not require to be described in full (e.g. WHO, HIV/AIDS, UK, EU, US/USA), others may do require to be described in full when first used in the manuscript. For instance CDC, FDA, MRSA, UN, ETEC. Also, "CRISPR/Cas" was first used in page 7, but described in full in page 11, and "ARGs" was described in full in page 4 and again in page 18. Please amend. Abbreviations should be consistent throughout the manuscript. For instance, US (in pages 4 and 5) and USA (in page 11) are both used; please amend. Abbreviations should only be used when the term is used more than once throughout the manuscript. "(CIC)" is used in page 15, but nowhere else; please delete it. References Please check references so that they comply with WJGPT guidelines. For dates, only the year, but not the month, is necessary. The volume, but not the number, of the journal is necessary. Use italics for the names of microorganism and other Latin terms (e.g., *in vitro*, *in vivo*) (e.g., references 22, 54). Use sentence case for the title (e.g. references 13, 35, 48, 53, 56). Please provide the complete reference for reference no. 52.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Pharmacology and Therapeutics

Manuscript NO: 31187

Title: Phage therapy: An alternative to antibiotics in the age of multi-drug resistance

Reviewer's code: 00504911

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Date sent for review: 2016-11-18

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
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		[Y] No	

COMMENTS TO AUTHORS

This review is acceptable since it explores past experiences and potential future directions of phages therapy. However, the complexity of the matter and the long list of exemplifications reported tend to reduce the attention of the reader. It is strongly suggested (recommended) to add some tables, in order to summarize the exemplifications reported and described, and some figures to represent the different mechanisms and activities described. These iconographies would improve significantly the review and cannot be avoided.