

## **Rebuttal Letter**

Dear Editors,

Thank you very much for your feedback and thorough reviews.

Reviewer 1 states minor revisions, overall, without major changes to the manuscript. We addressed all of Reviewer 1's comments in our revised manuscript.

Reviewer 2 states that our study is interesting and will affect upcoming research in this field.

We would like to answer all comments in detail and describe other changes to the previous version of our manuscript. All changes to the manuscript were done using MS Word "track changes".

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### **Science Editor**

Recommend for potential acceptance. 1 Scientific quality: The manuscript is a retrospective study that compare Dataview 3 and 4 - software improvement for evaluation of laryngopharyngeal pH testing (restech). The topic is in the scope of WJGS. (1) Classification: B and D. (2) Summary of the peer-review report: The reviewers thought this study is interesting and will affect upcoming research in the same field. However, it needs some revision and then could be published. The author should provide more details according to reviewer's comments. (3) Format: Two tables and three figures. 19 references were cited, including 3 references published in the last three years. One self-citation. 2 Language evaluation: 2B. Language editing certificate was provided by the author personally. 3 Academic norms and rules: The authors provided biostatistics review certificate. The authors signed the conflict-of-interest disclosure form and copyright license agreement. The institutional review board approval form was uploaded. The author statements written informed consent was deemed unnecessary by IRB. No academic misconduct was found in the CrossCheck investigation and the Bing search. 4 Supplementary comments: (1) Invited manuscript. (2) Without financial support. (3) Corresponding author has published one article in WJG.

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Thank you for stating that our research will affect upcoming research in the field and your comments. More details addressing the reviewers' comments will be provided in the revised manuscript.

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### **Editorial Office Director**

Recommend for potential acceptance. 1 Scientific quality: I have checked the comments written by the science editor. I basically agree with the science editor. The topic of laryngopharyngeal reflux is in the scope of WJGS. #02440885 showed that this study is an interesting, and will affect upcoming research in the same field. However, #02440885 and #02944288 pointed out some questions. The questions raised by the reviewers should be answered. There are 3 figure and 2 tables in the manuscript. Nineteen references were cited, including three references published in the last three years. No self-citation. 2 Language evaluation: I agree with the comments written by the science editor. 3 Academic norms and rules: I have checked the documents including the conflict-of-interest disclosure form, copyright license agreement, biostatistics review certificate, institutional review board

approval, and the informed consent statement, which are qualified. No academic misconduct was found in the CrossCheck investigation and the Bing search. 4 Others: (1) Without financial support. (2) Invited manuscript.

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Thank you for your comments. Questions raised by both reviewers will be answered in detail in the revised manuscript.

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### **Company Editor-in-Chief**

I have reviewed the Peer-Review Report, the full text of the manuscript and the relevant ethics documents, all of which have met the basic publishing requirements, and the manuscript is conditionally accepted with major revisions.

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Thank you for your comments. A revised manuscript, answering the comments made by the reviewers will be provided.

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### **Reviewers' Comments to Author**

#### **Reviewer #1:**

Weaknesses or deficiencies in the manuscript: 1) Small number of patients. 2) Single center study. 3) Patient's characteristics should be in Methods section. Plus exact number of variables in each group (dataview 3 and 4) should be presented either in the table or in the text.

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Thank you for this assessment. It is correct that current research on LPR is limited and therefore single center studies are the first step to elucidate early experience with a new topic. Our center is among the 3 largest upper gastrointestinal surgery centers in Europe and the submitted series is the largest series validating Restech with a correlation to the established 24 h pH metry in current literature. Nevertheless, we included the recommendation in the conclusion, that further multicentric studies are necessary.

All n=174 patients were analyzed with DataView 3 and 4 as stated in the text.

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#### **Reviewer #2:**

The manuscript entitled "SOFTWARE IMPROVEMENT FOR EVALUATION OF LARYNGOPHARYNGEAL PH TESTING (RESTECH) – A COMPARISON BETWEEN DATAVIEW 3 AND 4" was reviewed. This study is an interesting, and will affect upcoming research in the same field. 1. The authors should describe in more detail the differences between Data view 3 and Data view 4. 2. In particular, the method of correcting the pH drift is considered to have a large effect on the results, so please provide details. 3. I understand that it is common to enter data manually. Please describe the effect of manual input on the result, including the limitation.

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Thank you for this comment. We added further details of the changes applied in the new software version DataView 4. We focused especially on providing more details about the pH drift. However, since only 24-hour studies were included for analysis in this study, the impact of the new correction factor could not be examined. In addition, the effect of manual input of diary entries was explained in more detail and its impact on the study outcome.

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*We would like to thank you in advance for considering our manuscript for publication with the included changes.*