

**ESPS Manuscript NO: 5526**

**Title:** Current progress toward eradicating *Helicobacter pylori* in East Asian countries: differences in the 2013 revised guidelines between China, Japan, and Korea

**Dear Editor,**

I am pleased to submit the revised version according to the reviewer's recommendation. All the revised parts are highlighted with yellow background in the manuscript.

Followings are the point-by-point answers to the reviewer's comments.

Thank you.

Sincerely,

Sun-Young Lee M.D., Ph.D.

**Reviewer 2: No doubt, it is a very useful paper. There are some small objections. In the section "THERAPEUTIC REGIMENS FOR HELICOBACTER PYLORI ERADICATION, in Japan": Which means "Other popular regimens are ... "? Is it included into Japanese guideline? What are evidences of the efficacy of these regimes? What is the efficacy of these "popular regimens".**

Thanks for pointing out. It is not included in the guidelines, and there is no published data in English. It is only shortly mentioned in page 36 of the Japanese supplement published in April 18th, 2013 by the Japanese Society of Helicobacter Research. Based on your comments, I changed the sentence as follow.

Third-line treatment regimens preferred by the Japanese doctors are (1) amoxicillin 500 mg three or four times daily, ciprofloxacin 100 mg twice daily, and PPI two-four times daily for 1-2 weeks, (2) metronidazole 250 mg twice daily, ciprofloxacin 100 mg twice daily, and PPI two-four times daily for 1-2 weeks, and (3) amoxicillin 500 mg four times daily and PPI four times daily (with ecarbet natrium 1g) four times daily for 2-4 weeks as mentioned in page 36 of the

Japanese supplement published in April 18th, 2013 by the Japanese Society of *Helicobacter* Research (unpublished data in English).

**Reviewer 3: The manuscript is quite well written. It represents a comprehensive review in the field. It would be useful for the readers to include the discussion of PMID: 20695744.**

Thanks for your kind recommendation. I searched this article “Costa F, D'Elia MM. Management of *Helicobacter pylori* infection. Expert Rev Anti Infect Ther 2010;8:887-92”, and found that this is a review article from Italy. Unfortunately, I couldn't find any specific findings for the East-Asian countries in this paper, and therefore could not add this paper as a reference. It seems that the situations are quite different in Italy. For example, a triple therapy with levofloxacin, amoxicillin and proton pump inhibitor for 10-14 days is recommended as second-line treatment in Italy, whereas it is not allowed in the East-Asian countries. Since the current submitted paper focuses on the comparison between China, Japan, and Korea, the readers might be confused by comparing the differences between the East and West. I apologize that I could be more positive on this occasion.