

## ESPS Peer-review Report

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

**Ms:** 4721

**Title:** Usefulness of Dual-Priming Oligonucleotide-based multiplex Polymerase Chain Reaction(DPO-PCR) using Tissue Sample from Rapid Urease Test(RUT) kit in the Detection of Helicobacter pylori

**Reviewer code:** 00158379

**Science editor:** l.l.wen@wjgnet.com

**Date sent for review:** 2013-07-21 16:07

**Date reviewed:** 2013-08-25 15:08

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS

This article discussed the usefulness of dual-priming oligonucleotide-based multiplex polymerase chain reaction (DPO-PCR) using tissue sample from rapid urease test kit in the detection of Helicobacter pylori. The authors found that diagnostic sensitivity of histology, CLO and DPO-PCR were 85.7% (30/35), 74.3% (26/35) and 97.1% (34/35), respectively ( $P=0.02$ ). The concordance rate of DPO-PCR tests between tissue sample from CLO test kit and gastric biopsy samples was 94.4% (51/54). The rate of DPO-PCR and silver stain (+) in CLO-negative results was 20.0% (7/35).

It is well-written and provide important and interesting information. However, several questions should be clarified and addressed before consideration for publication.

1. Authors should state the sensitivity and specificity by using the dual-priming oligonucleotide-based multiplex polymerase chain reaction (DPO-PCR) in the literature, especially using tissue sample from rapid urease test kit in the detection of Helicobacter pylori.
2. Authors stated that the diagnosis of H. pylori infection was made based on 1) histologic evidence of H. pylori in any of two specimens taken from antrum / corpus by silver stain or 2) positive results of CLO and serological test. How about the sensitivity and specificity in using these criteria as gold standard.
3. Authors should clarify how the diagnosis of HP was made in their 35 patients.
4. Clinical manifestations were not mentioned, such as the usage of PPI or antibiotics



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before the endoscopy and HP evaluation, correlations between types of ulcers and HP infections, details in the treatment protocol.

5. Authors should clarify how the rate of successful eradication derived.

6. Author didn't compare their results to those in the literature, we would like to know any differences were found.

7. Concerning about clarithromycin resistance, authors should clarify the sensitivity and specificity of diagnosing resistance by using the 23S rRNA point mutation.

8. Cost, time consuming, labor using, sensitivity, specificity and effectiveness should be taken into account when using a new technique, authors should clarify in their study.