

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 25584

Title: Nonbismuth Concomitant Quadruple Therapy for Helicobacter pylori Eradication in Chinese Regions: A Meta-Analysis of Randomized Controlled Trials

Reviewer's code: 00503623

Reviewer's country: United States

Science editor: Ze-Mao Gong

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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 checked="" 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		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This manuscript reports on the outcome of non-bismuth quadruple therapy for Hp. eradication. The results are based on the data review from six randomized controlled trails and over 1600 patients. The conclusion is that the non-bismuth concomitant quadruple therapy achieved a higher Hp eradication rate than the standard triple therapy. Moreover, the patients undergoing non-bismuth quadruple therapy showed a higher compliance rate. The study is well presented, clearly written, and certainly worthy of reading.

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Title: Nonbismuth Concomitant Quadruple Therapy for Helicobacter pylori Eradication in Chinese Regions: A Meta-Analysis of Randomized Controlled Trials

Reviewer's code: 00227386

Reviewer's country: United Kingdom

Science editor: Ze-Mao Gong

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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
<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 type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This meta-analysis conducted on reports on Chinese populations from Taiwan, China and Singapore is based on the concept that eradication rates in response to the treatment of H Pylori infection may differ in Chinese populations from that in other ethnic communities. Out of 990 studies reviewed only 6 randomized controlled studies met the required criteria. The conclusion from these six trials is that non-bismuth concomitant quadruple therapy results in a higher eradication rate and better compliance and fewer adverse effects than either triple therapy or sequential therapy. These conclusions are however slenderly based on the following findings:-
ERADICATION In 2 out of 3 trials comparing concomitant quadruple therapy with triple therapy two showed a significantly higher eradication rate (91.2% vs 77.9%) and one showed no difference (81.7% vs 83.2%). In 3 trials comparing quadruple therapy with sequential therapy there was no significant difference in eradication rates (86.9% vs 86.0%)
COMPLIANCE In the 3 trials comparing concomitant quadruple therapy with triple therapy there was no significant difference between compliance rates In the 3 trials comparing concomitant quadruple therapy with sequential therapy there was greater

compliance with concomitant quadruple therapy but the difference was not significant. ADVERSE EFFECTS In only 2 studies comparing concomitant quadruple therapy with sequential therapy the adverse effects were reported and were similar, but in 3 studies comparing concomitant quadruple therapy with triple therapy just one study showed more but mild adverse effects with concomitant quadruple therapy. These findings need to be made out more clearly in the Abstract. The paper would also benefit from an additional Table showing the above findings clearly. The findings that are already shown in the present Figures 2 and 3 would not be clear to any readers who are non-statisticians. The English needs to be made clearer in several places:- Page 6, Line 3 should read:- 'are needed within specific regions' Page 7 Study selection, First Line. Should read- 'The following studies were selected for analysis'. 4th.Line. Delete 'those evaluated na?ve adult' and read 'Patients aged 18 years or over'. Page 8, 1st. and 2nd. Lines. Should read:- '...following criteria were present: patients enrolled in the trials who were proven to have had previous H pylori infection with ...'. Page 10. 2nd. Line 'Thus six' should read 'Thus only six'. 8th. Line. 'test' should read 'tests'. Page 11. Line 6. 'methodological quality' should read simply as:- 'details'. Page 14. 4th. Line from the bottom The statement that 'the compliance with concomitant therapy was higher' needs qualifying. It was higher, but not significantly, in comparison with sequential therapy. Page 16. 2nd paragraph beginning 'The heterogeneity....' is not clear and needs rewording.