



ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 14611

Title: The incidence and clinical characteristics of developed gastric cancer in peptic ulcer patients with Helicobacter pylori infection

Reviewer code: 02542141

Science editor: Jing Yu

Date sent for review: 2014-10-15 09:55

Date reviewed: 2014-10-23 23:13

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 checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This study mainly shows the incidence of developing gastric cancer post gastric/Duodenal ulcer and H Pylori infection. Also compare the clinical characteristics of Gastric cancer between Gastric ulcer patients and HP infection and those with DU. Study was well written, has novel idea and data. However, few points I would like to suggest to authors to explain in the article. 1. number of failure of HP eradication is surprisingly high (GU 59.4%, DU 51.4%), why? 2. After failure of HP eradication, any attempt to eradicate HP with second or third line antibiotics? and why not? Since HP is known to be carcinogen, and studies showed that HP eradication successfully decrease the development of recurrent ulcers. Should patients with ongoing HP infection be treated? 3. Could authors also compare patients between success HP eradication and failure HP eradication (on going HP infection), and associate with incidence of developing gastric cancer (in both GU and DU). 4. Did authors have data re: the proportion of patients having HP infection when first diagnosed GU and DU. 5. Did patients in the study take any NSAIDs/Aspirin which could be contributing to higher incidence of GU/DU (HP infection + NSAIDs use has higher risk of developing GU/DU than pt with HP infection alone or using NSAIDs alone) 6. If authors did not have data I mentioned, I believe this should be mentioned in limitations of the study.



ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 14611

Title: The incidence and clinical characteristics of developed gastric cancer in peptic ulcer patients with Helicobacter pylori infection

Reviewer code: 01433781

Science editor: Jing Yu

Date sent for review: 2014-10-15 09:55

Date reviewed: 2014-11-04 04:30

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B: Very good	<input type="checkbox"/> [Y] Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	BPG Search:	<input type="checkbox"/> [] Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> [] Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The relationship between H. pylori and gastritis is constant and direct. Different outcomes are associated with different patterns of gastritis: gastric ulcer and gastric cancer with atrophic pangastritis and low acid secretion (hypochlorhydria or achlorhydria), and duodenal ulcer with corpus sparing gastritis (antral predominant gastritis) and high acid secretion. Because different outcome are linked to markedly different patterns of gastritis, duodenal ulcer disease and gastric ulcer occur at entirely different ends of the spectrum of gastritis. While the infection usually starts in infancy or early childhood, there is a long latency period, and cancers are clinically diagnosed four or more decades later. During this period, a prolonged precancerous process takes place, represented by a "cascade" of events with the following well-characterized, sequential histopathologic stages: chronic active non-atrophic gastritis; multifocal atrophic gastritis; intestinal metaplasia (complete, then incomplete); dysplasia; and invasive carcinoma. In this study Jae Jin Hwang, et al attempted to evaluate the incidence of gastric cancer development in peptic gastric ulcer and duodenal ulcer patients positive for H. pylori infection They demonstrated that the incidence rate and relative risk of gastric cancer development in patients with gastric ulcer were significantly higher than those with duodenal ulcer. The findings are reasonable and make sense. The paper should be interesting to the readership and have to be published. However some minor comments have to be addressed before publication: In the discussion section: I guess this sentence need to be fixed: Whereas



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

<http://www.wjgnet.com>

patients with DU have been reported to develop H. pylori infection at rates almost as high as GU patients [28], their risk of developing of GC is significantly lower [7]. Also this sentence is not clear: The H. pylori-eradication rate in GU patients was significantly lower than in DU patient, though the success rate of eradication therapy was lower than the failure rate in both patients. Would be interesting to investigate the incidence of gastric cancer on H. pylori negative peptic ulcers. There are several grammar mistakes that need to be corrected