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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 14854
Title: Comparison of two proton pump inhibitor treatment regimens in Chinese patients diagnosed with chronic gastritis
Reviewer's code: 00039368
Reviewer's country: Estonia
Science editor: Ya-Juan Ma
Date sent for review: 2014-10-28 10:44
Date reviewed: 2014-12-11 18:59

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[Y] Grade A: Excellent	[Y] Grade A: Priority publishing	PubMed Search:	[Y] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Duplicate publication	[ ] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	[ ] Plagiarism	[ ] Minor revision
[ ] Grade E: Poor		[Y] No	[ ] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

This very well designed, performed and written multicenter, randomized, open-label study considers the comparison of symptom control between the recommended proton pump inhibitor (PPI) treatment regimens for non-erosive reflux disease (8 weeks) and chronic gastritis (2 weeks) in 305 Chinese patients who have typical reflux symptoms and negative endoscopy. This study confirms the 8-week PPI regimen provided marginally better symptom control and relief rates that the 2-week regimen, with a similar safety profile. This study is making a great contribution to randomized clinical trial studies lead to optimization of gastro-esophageal reflux disease (GERD) treatment. This is a very well written and set up clinical trial study. The authors give a well and clear overview about the study background and raised clearly the aim of the study, which is fulfilled. The authors present very detailed description of the patients included in the study, of assessments and treatments. The statistical analysis was specified and described very carefully. The material studied is large enough and allows to drawn the conclusions. The two Tables and 3 figure presented in the paper are accurate, detailed and give a good overview about the studied materials and results.

The Results are presented clearly and have been discussed well.

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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 14854
Title: Comparison of two proton pump inhibitor treatment regimens in Chinese patients diagnosed with chronic gastritis
Reviewer's code: 00183445
Reviewer's country: Poland
Science editor: Ya-Juan Ma
Date sent for review: 2014-10-28 10:44
Date reviewed: 2014-12-16 02:05

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	PubMed Search:	[Y] Accept
[ ] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[Y] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Duplicate publication	[ ] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	[ ] Plagiarism	[ ] Minor revision
[ ] Grade E: Poor		[Y] No	[ ] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

The aim of this study was to compare symptom control between the recommended proton pomp inhibitor (PPI, omeprasole 20 mg once daily) treatment regimens: 8 weeks versus 2 weeks, in the patients who have typical reflux symptoms and a negative endoscopy.The symptom control rate showed a small but statistically significant difference in favour of the 8-week regimen. Fewer unscheduled visits and higher patients satisfaction supported the therapeuthic benefits of the 8-week regimen versus the 2 week regimen. Both regimens were safe and well tolerated. This is well constructed multicenter, randomized study with high practical value.The principle of patients selection was explained in details including the broad range of exclusion. The procedures of treatment and assessment are clear. Safety assessments included monitoring of serius adverse events and discontinuation due such events of any severity. Statistical analysis is clear.