

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Pathophysiology

ESPS manuscript NO: 17863

Title: Hypoallergenic formula with Lactobacillus rhamnosus GG for babies with colic: A pilot study of recruitment, retention, and fecal biomarkers

Reviewer's code: 00034168

Reviewer's country: China

Science editor: Yue-Li Tian

Date sent for review: 2015-03-31 09:23

Date reviewed: 2015-05-29 16:08

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input 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 checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Please follow the CONSORT 2010 Checklist to revise the format.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Pathophysiology

ESPS manuscript NO: 17863

Title: Hypoallergenic formula with Lactobacillus rhamnosus GG for babies with colic: A pilot study of recruitment, retention, and fecal biomarkers

Reviewer's code: 00188382

Reviewer's country: Germany

Science editor: Yue-Li Tian

Date sent for review: 2015-03-31 09:23

Date reviewed: 2015-05-30 04:03

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input 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 checked="" 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

Dear editor-in-Chief, Thank you very much for inviting me to peer-review for the World Journal of Gastrointestinal Pathophysiology. I have carefully read the manuscript titled: "Hypoallergenic Formula with Lactobacillus rhamnosus GG for Babies with Colic: A Pilot Study of Recruitment, Retention, and Fecal Biomarkers". Although the topic is interesting and the manuscript well presented, some important issues should be address in order to consider this paper for publication. Major concerns 1. In Table 2 there is no "p" value for the differences presented between LGG+ an LGG- group per visit. This is a key data that will demonstrate if LGG had or not a significant impact on crying + fussing time, and should be addressed. 2. If differences on crying + fussing time between LGG-treated and non-treated infants during different visits was significant, but no significant changes in blood cytokine, stool microbiota, gas and calprotectin were detected, which pathophysiological hypothesis the authors will support to explain these results? Will they consider that the tested biomarkers performed are enough to assess intestinal inflammation? Will authors consider to investigate the intestinal mucosal microenvironment in infants with colic?

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Pathophysiology

ESPS manuscript NO: 17863

Title: Hypoallergenic formula with Lactobacillus rhamnosus GG for babies with colic: A pilot study of recruitment, retention, and fecal biomarkers

Reviewer's code: 00029421

Reviewer's country: Ireland

Science editor: Yue-Li Tian

Date sent for review: 2015-03-31 09:23

Date reviewed: 2015-06-02 00:28

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" 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"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

In this manuscript Fatheree et al. describe the results of the study of the use of Lactobacillus Rhamnosus GG in babies with colic. I have the following comments: 1. Although this is described as a pilot study in the title and elsewhere in the Ms. it appears to have started out as a properly constructed randomised controlled trial with appropriate study size calculations that had to be abandoned for lack of recruitment within the funding timeframe. 2. In relation to 1, above there is confusion within the manuscript as to what the a priori aim was. For instance under the section "Sample size and power" the authors say that the study aimed to determine recruitment, retention, adverse events and biomarkers but was not powered to detect differences in crying time between the two studies arms. The wording here suggests that the study was not aiming to determine these clinical differences. However they go on then to describe a sample size calculation based on reduction in crying that would necessitate 60 infants in total – my understanding is that this was in fact their original intent. 3. While it is worthy of the authors (and of the peer review process) to extricate relevant information from an otherwise unsuccessful study I am not sure that this particular project

yielded novel information over and above the difficulties of performing clinical trials among babies with regulatory disorders in particular. 4. There were no differences for any of the parameters examined between the two groups at any point in the study. Therefore it is not appropriate to include statements in the abstract or elsewhere which could be misconstrued as showing a difference in favour of the probiotic arm (In particular, "The maximal difference of crying + fussing time was observed at day 14, comparing the 2 groups, with a mean difference of -91 (95% CI: -76, 259) minutes, favoring the LGG+ group") nor indeed that calprotectin "showed a trend" towards a decrease in the probiotic arm. These particular results have no more meaning than stating that there was a trend towards increased crying behaviour in the nontreated arm at baseline! 5. It is not clear why the particular circulating cytokines that were measured were chosen. 6. I would be concerned regarding the loss of blinding by the use of a sticky label to partially cover the formula containers. 7. It would seem that the colonisation by the probiotic organism used did not persist (figure 3A). This is a potentially major issue suggesting, amongst other possibilities, that either the children were no longer getting the appropriate formula, that the organism was no longer viable within the formula or this particular probiotic rapidly becomes excluded by the normal microbiota in babies?