



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

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 14939

Title: Self-reported dietary fructose intolerance in irritable bowel syndrome–proposal of new criteria for diagnosis

Reviewer’s code: 00503417

Reviewer’s country: India

Science editor: Ya-Juan Ma

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| CLASSIFICATION | LANGUAGE EVALUATION | SCIENTIFIC MISCONDUCT | CONCLUSION |
|---|---|--|--|
| <input type="checkbox"/> Grade A: Excellent | <input type="checkbox"/> Grade A: Priority publishing | PubMed 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"/> Duplicate publication | |
| <input type="checkbox"/> Grade D: Fair | <input type="checkbox"/> Grade C: A great deal of language polishing | <input type="checkbox"/> Plagiarism | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade E: Poor | | <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Minor revision |
| | <input type="checkbox"/> Grade D: Rejected | 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

Although the findings of this study replicate commonsense practice, this is a useful addition to literature in these days of evidence-based medicine. The sequence the authors followed is historically what happened with the lactose-intolerance studies, where the focus shifted from mucosal lactase measurements to lactose tolerance curves to symptom analysis. Minor suggestions: 1. Can the authors tell us whether the provocation test adds validity to the results of the FRD or can be dispensed with? 2. The concluding line "This approach can reduce our total costs for invasive second line examinations such as endoscopies, especially in younger patients with low cancer risk and normal fecal tests for blood and calprotectin" seems stretched. These latter tests have their role when other diagnoses are being considered, and a positive DFI does not exclude the need for these tests in such circumstances. The line therefore may be deleted 3. Similarly, the rising prevalence of IBS in recent years parallels rising consumption of not only fructose but of processed foods and additives in general