

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 19804

Title: A 7-day triple therapy is a better choice for H. pylori eradication in a Chinese province with a low incidence of antibiotic resistance

Reviewer's code: 00036328

Reviewer's country: Italy

Science editor: Ya-Juan Ma

Date sent for review: 2015-05-23 14:22

Date reviewed: 2015-07-20 01:38

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

The study "A 7-day triple therapy is a better choice for H. pylori eradication in a Chinese province with a low incidence of antibiotic resistance" from Tong Y at al. investigates whether the 7 days of triple therapies are still valid in Yongkang city with a low-level resistant population. The study answers the question that eradication regimens should be based on the best locally effective regimen, ideally using individual susceptibility testing or community antibiotic susceptibility, or antibiotic consumption data and clinical outcome data (Sugano K et al. Kyoto global consensus report on Helicobacter pylori gastritis. Gut. 2015 Jul 17. pii: gutjnl-2015-309252). The study is interesting not only for the Zhejiang Province of China, and probably the results should be extended for those areas with low-level resistant population. My comments are listed below. 1. The study design includes a randomization scheme that is near to tossing the coin. I think that the choice of a couple of days of the week for the selection of the three groups it is not a protection for a selection bias. It is necessary to explain this scheme and its limitations in the text. 2. The choice of the three different 7-day triple therapy needs of references, especially for the use of PPI 20 md b.i.d. instead of 40 mg b.i.d. 3. Eight

weeks after treatment, a13C-urea breath test was performed on patients as follow-up. It is necessary to use a reference (according to). 4. Paragraph Comparative analysis of eradication rate and antibiotics resistance (page 6). Last line. I do not understand the $p>0.05$ (not significant?). 5. Discussion section. Third paragraph, page 7: It is stated that there was also no significant difference among several endoscopic diagnoses ($p>0.05$). In the results section no data are reported about this point. For this reason, you must report this result with the exact p value. Moreover, because I suppose that the statistical analysis is based on a 3×11 contingency table, it is necessary to explain in the statistical analysis section which test was used for this purpose (Exact test?). 6. Table 1 is poor of data. You can show beside patients and follow-up patients, even data divided into the three groups with the p values. Moreover, age should be better showed with the use of ranges (e.g. ≤ 10 , 11-20, 21-30, 31-40, 41-50, 51-60, 61-70, 71-80, 81-90). 7. References must follow the guideline of WJG.

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Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 19804

Title: A 7-day triple therapy is a better choice for H. pylori eradication in a Chinese province with a low incidence of antibiotic resistance

Reviewer's code: 00503418

Reviewer's country: Hungary

Science editor: Ya-Juan Ma

Date sent for review: 2015-05-23 14:22

Date reviewed: 2015-06-03 01:18

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 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 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

Good study but too many variables to comprehend.