

**ESPS Peer-review Report****Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 10850**Title:** Increased inspiratory esophagogastric junction pressure in systemic sclerosis: a positive add-on to LES function.**Reviewer code:** 00068404**Science editor:** Yuan Qi**Date sent for review:** 2014-04-23 16:49**Date reviewed:** 2014-04-27 20:30

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

**COMMENTS TO AUTHORS**

This study shows that SSc patients with severe esophageal disease have increased inspiratory EGJ pressure, despite a low normal-breathing LES pressure. Standardized inspiratory maneuvers could be an add-on to EGJ pressure in SSc patients and indicates the antireflux barrier can be trained.



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### ESPS Peer-review Report

**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 10850

**Title:** Increased inspiratory esophagogastric junction pressure in systemic sclerosis: a positive add-on to LES function.

**Reviewer code:** 00068388

**Science editor:** Yuan Qi

**Date sent for review:** 2014-04-23 16:49

**Date reviewed:** 2014-05-08 21:24

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

The study investigated the CD function in SSc with high resolution manometry and standardized inspiratory maneuvers. And the results suggest that inspiratory muscle training may be an add-on to GERD treatment in SSc patients and in GERD in general.

**ESPS Peer-review Report****Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 10850**Title:** Increased inspiratory esophagogastric junction pressure in systemic sclerosis: a positive add-on to LES function.**Reviewer code:** 00068702**Science editor:** Yuan Qi**Date sent for review:** 2014-04-23 16:49**Date reviewed:** 2014-05-11 12:31

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 checked="" type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

**COMMENTS TO AUTHORS**

The authors reported an interesting phenomenon that increased inspiratory esophagogastric junction pressure and contributed it to pathophysiological diaphragm adaptation in SSc patients with lung fibrosis. The increased esophagogastric junction pressure also serves as a protective factor of GERD and be enforced through training. It is worthy to be published, but the writing should be simplified.

**ESPS Peer-review Report****Name of Journal:** World Journal of Gastroenterology**ESPS Manuscript NO:** 10850**Title:** Increased inspiratory esophagogastric junction pressure in systemic sclerosis: a positive add-on to LES function.**Reviewer code:** 00068528**Science editor:** Yuan Qi**Date sent for review:** 2014-04-23 16:49**Date reviewed:** 2014-05-18 01:09

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

**COMMENTS TO AUTHORS**

This paper addresses an important and widely-investigated area dealing with the pathogenesis of Gastrointestinal involvement, particularly GERD, in patients affected by Systemic sclerosis. In their article, the authors describe how the involvement of LES and of the Crural diaphragm could have an impact in the dynamics of G-E reflux in these patients. The authors well describe all the diagnostic procedures they adopted and the results they obtained. Although the number of patients and controls is small, the paper is very interesting so I consider it suitable for publication on WJG.