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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 21715
Title: Impact of obesity treatment on gastroesophageal reflux disease (GERD)
Reviewer's code: 00058269
Reviewer's country: Israel
Science editor: Ze-Mao Gong
Date sent for review: 2015-07-30 10:35
Date reviewed: 2015-08-11 04:13

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] 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	[Y] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Interesting and full review of GERD in obese patients. I recommended to add a mini bypass/omega loop bypass in surgical options of treatment of obesity. According to last studies there is low evidence of GERD following this type of bypass

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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 21715
Title: Impact of obesity treatment on gastroesophageal reflux disease (GERD)
Reviewer's code: 00058872
Reviewer's country: Italy
Science editor: Ze-Mao Gong
Date sent for review: 2015-07-30 10:35
Date reviewed: 2015-07-30 18:35

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] 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	[Y] Minor revision
[ ] Grade E: Poor		[Y] No	[ ] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

NAFLD is strictly linked to obesity. What about non-alcoholic fatty liver disease as a new criterion to define metabolic syndrome? World J Gastroenterol. 2013 Jun 14;19(22):3375-84. Recent data show that the prevalence of GERD typical symptoms is higher in patients with NAFLD. GERD was associated with higher BMI and MetS, suggesting NAFLD as an independent risk factor for GERD symptoms. Dig Dis Sci. 2014 Aug;59(8):1939-45.Nonalcoholic fatty liver disease increases risk for gastroesophageal refluxsymptoms. Authors need to deeply comment on the afore mentioned aspect, quoting these appropriate references to give readers a wider view of the topic.

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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 21715
Title: Impact of obesity treatment on gastroesophageal reflux disease (GERD)
Reviewer's code: 00060494
Reviewer's country: Taiwan
Science editor: Ze-Mao Gong
Date sent for review: 2015-07-30 10:35
Date reviewed: 2015-08-03 22:13

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] The same title	[Y] 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

1. The hormone effects on increasing GERD mechanism showed confused in this review. I means that Leptin and adiponectin have been shown to implicate in the relationship with GERD symptoms were just due to obesity but not due to increased leptin and decreased adiponectin levels. 2. In clinical setting, Medical treatment was still the main method for GERD treatment in obese patients. Many studies showed the less medications (antacids, H2RAs and PPIs) responsive to GERD in obese patients. However, is there any data supply to illustrate which kind of medication is more effective than others for GERD treatment in obese patients?