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## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**ESPS manuscript NO:** 24306

**Title:** Sensory characterization of bowel cleansing solutions

**Reviewer's code:** 03477204

**Reviewer's country:** Turkey

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-01-18 16:40

**Date reviewed:** 2016-01-25 12:39

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google 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 type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" 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 study, the authors aimed to compare the commercial bowel cleansing solutions according to their taste, odor and mouthfeel assessment. This study well considered and the purpose of this study is understandable. However, I have some questions and suggestions to the authors: 1) I don't understand why they separate study as panelist and participants. This discrimination is confusing. 2) In the table S1, what do the 'sample' and the 'replicate' words mean? And the significant differences between these groups must be determined in the legend (e.g. p<0.05 vs. sample?) Thus, this table must be explained more clearly. 3) Whose results were described in table 2? Panelists or participants? In this table, the results' owner might be described in the article or the table. This issue must be determined and explained more clearly by the authors. 4) Finally, the main result of this study, the message of this study, may be defined more clearly in the discussion part. There isn't any suggestion by the authors about which preparation is palatable and more tolerable by the participants. There may be a suggestion as a conclusion in the discussion part of the article.



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## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**ESPS manuscript NO:** 24306

**Title:** Sensory characterization of bowel cleansing solutions

**Reviewer's code:** 00035678

**Reviewer's country:** Canada

**Science editor:** Ze-Mao Gong

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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
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

This is an interesting article that presents novel data on the palatability of various bowel preparations. Within its limits, it is a worthwhile paper, but I think there is a risk of over-extrapolation, given that the study was based on healthy volunteers tasting small samples (understandably!), thereby missing out volume effects, which are a key determinant of tolerability and acceptability. The authors have acknowledged this limitation in the discussion but it is not apparent in the abstract. As many readers unfortunately never get beyond the abstract, I would like to see a few words inserted to make this clear. My second comment relates to a couple of over-sweeping statements in the introduction: 1. "Bowel laxative preparations are generally poorly tolerated, disliked and as a result often serve as an impediment to CRC screening and surveillance" This overstates the case. While nobody would take a bowel prep for enjoyment, most patient surveys in screening programmes show that patients would be willing to repeat the exercise, when required. 2. "Despite the above, inadequate bowel preparation occurs surprisingly often and in as many as 25% to 40% of patients [4]" The reference for this statement is a review article that cites two references. The first is also a review, stating that "up to 25%" of colonoscopies have inadequate cleansing. The second is a study that showed that 10% of



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colonoscopies had cleansing of sufficiently poor quality to impair adenoma detection rate - ie. consistent with the "up to 25%" figure 3. "Clearly, the most important factor remains the adherence with the prescribed laxative regimen (including diet)". I'm not sure there is much evidence to support this - there are many factors involved in cleansing success. Adherence with the regimen is one of these, although it does not appear to be as important as one might think. Additionally, there is virtually no published research relating to diet - it is not even clear whether dietary restriction is important. There is a clear reason for doing this research but I believe hyperbolic statements like these will tend to irritate the reader and distract from the important point that they are making. I think that the introduction therefore needs to be revisited, toned down and appropriately referenced.