



# BAISHIDENG PUBLISHING GROUP INC

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## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 25337

**Title:** Update on diagnostic value of breath test in gastrointestinal and liver diseases

**Reviewer's code:** 00158730

**Reviewer's country:** United States

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2016-03-07 09:04

**Date reviewed:** 2016-03-08 05:25

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 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"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input checked="" 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 type="checkbox"/> Minor revision
		BPG Search:	<input checked="" 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

1. Someone more familiar with English should revise your manuscript- grammar and word usage need revisions. 2. Breath Hydrogen testing section would benefit from revision. Mention of fasting breath hydrogen values should be included in SIBO. 3. Several of the references need spell checks (i.e. 57, 61, 65) and are not in the correct journal format(42).

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 25337

**Title:** Update on diagnostic value of breath test in gastrointestinal and liver diseases

**Reviewer's code:** 00058696

**Reviewer's country:** United States

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2016-03-07 09:04

**Date reviewed:** 2016-03-11 10:29

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 checked="" 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 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 type="checkbox"/> Minor revision
		BPG Search:	<input checked="" 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

I have reviewed this review article. My major comments include: The authors do not provide for us a summary of the literature review that they completed prior to their preparing this review article. The sensitivity and specificity of breathing testing is dependent upon the patient population being evaluated; since the authors do not provide ranges for these 2 parameters, this is not brought out in this manuscript. The combination of simultaneous determination of hydrogen and methane in breath samples is not well described (when to use, sensitivity, specificity, advantages, etc.). The lactose hydrogen breath test depends upon the lactose reaching the terminal ileum or cecum. This must be clear. If the oral-cecal transit time is up to 6 hours as suggested by the authors, patients with very slow small bowel transit are more likely to have small intestinal bacterial overgrowth, a potential cause of a false positive breath test with ingestion of lactose. Since sorbitol (see "sorbital" on page 9) is a non-absorbed sugar, it is not clear why one would use it as a test of carbohydrate metabolism. The authors should consider looking at evidence that gut bacteria can produce methane from hydrogen. The authors do not clearly demonstrate that newer analytical techniques improve sensitivity and specificity as a benefit of having a higher expense. In the



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Section "Basic Mechanism of Breath Test", methane must be included. In Practical application of Carbon Breath Testing: the weaknesses of the H. pylori test including patients' use of H,K-ATPase inhibitors, the need for metabolic activity of the bacteria, and the effect of rapid gastric emptying (which can be induced by H. pylori itself) should be clearly summarized as limitations (and therefore any studies claiming high sensitivity and specificity should be closely examined). This breath test is simply a different type of bioassay. The authors do not describe the lack of enthusiasm among GI physicians to use tests (e.g. breath tests) which provide minimal reimbursement. The article is not easy to follow. It would be helpful if the authors were to prepare tables to summarize the use of breath testing: for evaluation of specific patient populations or for evaluation of specific symptoms. My minor comments include: Abstract line 1: "intermittently" for "hesitantly"? Abstract, final paragraph: "has got" should be "has an". Introduction, line 2: should be "carbon dioxide". Basic Mechanisms of Breath Test, final line: "are enlisted in" could be "are summarized in Table 1". Hydrogen Breath Test, line 4: "becomes part of" should be "is absorbed into". Page 11, Points to consider: "still bounds the wide spread" should read "still limits the widespread". Page 13, paragraph 3: "asses" is assess. Page 19, paragraph 2: "a must need" could be "an important requirement". Table 3: write out the term for the abbreviation "GIT". Table 4: Consider "Representative diagnostic accuracy". In the Figures, it is not presently clear that produced gases are absorbed into the intravascular space.



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## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 25337

**Title:** Update on diagnostic value of breath test in gastrointestinal and liver diseases

**Reviewer's code:** 02445772

**Reviewer's country:** Austria

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2016-03-07 09:04

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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 checked="" 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
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		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

This update on diagnostic value of breath tests is a nice written collective review on what is known on the topic. This review gives a precise and compact overview, is written informative and easy to understand even for non-experts in the field. However, critical assessment and detailed discussion are missing. More comments: there are many errors in the reference list (I think "copy and based" errors with wrong letters and signs) Table 1 should be better organized; intersections of Carbon breath tests are not clear Table 3 should be deleted, this is not a classical table (if necessary a description in the text would be preferable) Table 4 is nice! Figures 1 and 2 are good; Figure 3 should be deleted (no information!)



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## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 25337

**Title:** Update on diagnostic value of breath test in gastrointestinal and liver diseases

**Reviewer's code:** 00050564

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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 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"/> Duplicate publication	
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		<input type="checkbox"/> No	

### COMMENTS TO AUTHORS

Well written review but is trying to do too much and should be more selective and deal with those tests in more detail. What the reader will relay seek is guidance on the commonly performed test (for SIBO and food intolerance). What are the best tests, how should they be optimally performed and how should they be analyzed.