

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242 Fax: +1-925-223-8243 E-mail: bpgoffice@wjgnet.com http://www.wjgnet.com

#### ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Respirology

ESPS manuscript NO: 31124

**Title:** Lung microbiome in healthy and diseased individuals

Reviewer's code: 00608223

**Reviewer's country:** United Kingdom

Science editor: Fang-Fang Ji

**Date sent for review: 2016-11-03 17:15** 

Date reviewed: 2017-01-14 20:11

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] Grade B: Very good	[ Y] Grade B: Minor language	[ ] The same title	[ ] High priority for
[ ] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[ ] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[Y] No	[Y] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ ] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

#### **COMMENTS TO AUTHORS**

This interesting review concerns the role of the lung microbiome. On the whole it is well structured and comprehensive in the issues it considers. The figures were appropriate and well designed. There were a few minor changes which could improve the article 1) The English needs some minor polishing throughout 2) The final part of the article concerning probiotics might benefit from a table to summarise the interventional work done (albeit mostly pre-clinical in nature). Alternatively another figure to illustrate concepts in the later parts of the article would be beneficial to break up the text subsequent to figure 3. 3) I wondered if a section on clinical management would be worthwhile? At the moment the only element on treatment as such is the probiotic bit; however the mechanistic parts of the article made me wonder about the role of managing the gut-lung axis (e.g. reflux treatment?) and about the role of long term antibiotic therapy with respect to the microbiome (e.g. are there any microbiome studies of azithromycin?). I appreciate that if robust studies do not exist much of this would be speculative but it would enhance the article for a clinical readership



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#### **ESPS PEER-REVIEW REPORT**

Name of journal: World Journal of Respirology

ESPS manuscript NO: 31124

Title: Lung microbiome in healthy and diseased individuals

Reviewer's code: 00731695 Reviewer's country: Italy Science editor: Fang-Fang Ji

**Date sent for review: 2016-11-03 17:15** 

Date reviewed: 2017-01-19 18:00

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] Grade B: Very good	[ Y] Grade B: Minor language	[ ] The same title	[ ] High priority for
[ ] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[ ] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[Y] No	[ Y] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ ] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

#### COMMENTS TO AUTHORS

This paper is a comprehensive review of pulmonary microbiome and gut-lung axis interactions; authors report on "resident microflora" and its changes under various conditions such as respiratory diseases, gastroesophageal reflux, loss of protective mechanisms, bacterial colonization, administration of probiotics. Notions are well described and sufficiently detailed, novel findings to current knowledge have been added, there is some novelty in comparison with the classical descriptions However, to increase the practical/educational value of the manuscript, a short comment on the effect of antibiotics commonly administered deserve reporting, both on pulmonary and intestinal microbiome, e.g. what are the modifications-prevalence of flora at the end of a conventional antibiotic treatment?, which microbiome (lung or gut) suffers most from antibacterial therapy? How long does the biodiversity of flora take to come back to a bacterial population similar to the original? (after the treatment), Is there any prevalence of viruses after the treatment? etc.. In addition, few words on the effects of PREBIOTICS on gut microbiome or on gut-lung axis would also be appreciated. Probiotics have been shown effective in managing certain gastrointestinal conditions, however..have PROBIOTICS the same power that PREBIOTIC have?. Minor English



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editing is necessary



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#### **ESPS PEER-REVIEW REPORT**

Name of journal: World Journal of Respirology

ESPS manuscript NO: 31124

**Title:** Lung microbiome in healthy and diseased individuals

Reviewer's code: 01939763 Reviewer's country: Taiwan Science editor: Fang-Fang Ji

**Date sent for review: 2016-11-03 17:15** 

Date reviewed: 2017-02-07 15:54

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language	[ ] The same title	[ ] High priority for
[Y] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[Y] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[Y] No	[ Y] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ ] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

#### COMMENTS TO AUTHORS

This is an interesting article. However, the manuscript contains some grammatical errors and conceptual questions, which require attention. Suggestions: 1. Grammar This manuscript contains certain level of scientific merit and it is clearly written. However, the manuscript has quite a number of misused and redundant sentences as well as grammatical errors. I would suggest that the authors find some help in English edition. 2. Examples: Introduction: (A) --- within the frame work of the "Human microbiome" project (HMP 2007) --- (line 2); (B) Ongoing studies? Preliminary data showed ---- (line 12). Figure 1: (A) Local growth conditions, instead of regional. Page 3: The model --- has been proposed (bottom line). Page 4, Fig. 2: Change of local environment; bacterial nutrients; dendritic cells (instead of dendrite cells). Page 5, GIT, full name. (gastro-intestinal tract). The last sentence is not clear, and a bit mix-up. It is better to respectively describe cell types, cytokines and transcription factor. Page 6, figure legend, in addition to mesenteric lymph node, Pever's patch and appendix are also important. Page 7, 1st paragraph, line 5, "The interaction --demonstrated?" Not everything is promoted, some condition, such as inflammation or disease, would be aggravated.