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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Methodology

ESPS manuscript NO: 18011

Title: Refractory chronic cough due to gastroesophageal reflux: definition, mechanism and management

Reviewer's code: 00570480

Reviewer's country: Australia

Science editor: Xue-Mei Gong

Date sent for review: 2015-04-02 17:16

Date reviewed: 2015-05-09 10:27

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"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		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

This is a useful narrative review of chronic reflux cough. The review would be improved by a summary table of the pros and cons of the various methods of diagnosis, the work-up of the differential and a comparison of the approaches to therapy. A key points box would be a useful adjunct. There are some minor grammar and spelling issues throughout the document

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Methodology

ESPS manuscript NO: 18011

Title: Refractory chronic cough due to gastroesophageal reflux: definition, mechanism and management

Reviewer's code: 02546914

Reviewer's country: Italy

Science editor: Xue-Mei Gong

Date sent for review: 2015-04-02 17:16

Date reviewed: 2015-04-02 17:59

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"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Dear Author, I read with interest your review article. It is well written and discusses all topic in GERD related chronic cough. I desire to underline that you could added the finding of a research article recently accepted for publication in Alimentary Pharmacology and Therapeutic. This paper discovers that baseline impedance (IB) values might improve the ability of MII-pH analysis to recognize patients who better respond to PPI therapy. The authors described that the presence of a pathological AET or pathological IB in patients with chronic cough is associated with a greater probability of PPI response. IB is a promising variable in patients with chronic cough, as it increases the diagnostic yield of MII-pH and allows confirmation of the GERD diagnosis in these patients. (ARTICLE: Reflux pattern and role of impedance-pH variables in predicting PPI response in patients with suspected GERD-related chronic cough. Ribolsi M, Savarino E, De Bortoli N, Balestrieri P, Furnari M, Martinucci I, Casale M, Greco F, Salvinelli F, Savarino V, Marchi S, Cicala M. Aliment Pharmacol Ther. 2014 Oct;40(8):966-73. doi: 10.1111/apt.12919. Epub 2014 Aug 11. (PMID: 25109844) Minor suggestion: Change Ggastroesophageal in Gastroesophageal (1st word in Background) Best



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Regards.



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Methodology

ESPS manuscript NO: 18011

Title: Refractory chronic cough due to gastroesophageal reflux: definition, mechanism and management

Reviewer’s code: 03259215

Reviewer’s country: United States

Science editor: Xue-Mei Gong

Date sent for review: 2015-04-02 17:16

Date reviewed: 2015-05-20 01:55

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"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
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<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This paper addresses a common problem faced by gastroenterologists, primary care physicians and ENT. It will an interesting read for the audience. I ll like to point out a few improvements in the paper. 1. The terms GERD and GERC have been used interchangeably in this paper. I suggest they are separated. 2. Causes of chronic cough should be discussed briefly. The major reason of chronic cough being post nasal drip, asthma and then GERD. 3. Relationship between Asthma and GERD (Increased negative pressure in thorax causing reflux) should be addressed. 4. Mechanism of cough in GERD, neural arc involved should be mentioned. 5. Complete work up of patients includes imaging of sinuses and chest , pulmonary function tests should be mentioned before it is attributed to GERD. 6. I believe if the evidence cited in every section of paper (evidence that GERD causes cough, studies talking about medication efficacy should be presented in table form as well. It will make the paper more easy to read and compare the evidence)