

Format for ANSWERING REVIEWERS



October 17, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 5398 revision.doc).

Title: Attempts to enhance eradication rate of *Helicobacter pylori* infection

Author: Chang Seok Bang, Gwang Ho Baik

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 5398

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

First of all, we appreciate the Editor's and reviewers' thoughtful and helpful comments. Also, we are pleased to have an opportunity to make this paper to be an even better one and to be accepted with major revision, because the Editor and reviewer provided additional important points that we have not realized before.

Reviewer No. 00005855

In Page 5, Lines 14-16. The decreased number of pills or capsules is supposed to enhance the compliance. Thus, it is reasonable to show promising eradication rates. Is it appropriate to use the term "Despite" ?

->The grammar was corrected as "As the decreased number of pills and simplified regimen, quadruple therapy including combination capsules with PPI has shown promising eradication rates."

Reviewer No. 00020433

The language needs to be improved.

->The manuscript was edited by English editing company. Here is the recommendation letter;
Note from your editor:

Thank you for the opportunity to review this interesting overview on H. pylori management.

The manuscript is fairly polished, and for the most part, the ideas are organized well. Unfortunately, issues stemming from improper use of the English language do interfere with the transmission of

the intended meaning of the author.

I have done my best to preserve the intended meaning while making the necessary linguistic changes, and ask the author to excuse the editor for any unintended changes to the meaning of the document.

Please do let us know if you have any questions regarding the corrections or comments. Thank you, and good luck with the publication process!

Best,

Aram Harijan, M.D.
harrisco@harrisco.net

Reviewer No. 00003361

1. The abstract is inadequate and provides little useful information, and has not been reviewed for English usage. I recommend replacing the last two sentences of the abstract with the "core tip" and then compose a more concise core tip.

-> The abstract and core tip was corrected as recommendation. The corrected manuscript is colored red.

2. Page 5 – second line of last paragraph. Please clarify "tinidazole/metronidazole."

-> The sentence was corrected as "metronidazole (or tinidazole)".

3. The hallmark of treatment for helicobacter pylori is the need for multiple antibiotics for up to two weeks of treatment Please include a section addressing the importance of adherence and strategies for improving adherence as this is essential for success for this treatment.

-> Page 16, "Adherence to treatment" section was added on the manuscript as recommendation.

4. The tables should be improved to be more useful for clinicians. For help in interpreting Table 1 please include in an additional table a listing of what is included for "clarithromycin containing regimens", "Bismuth-containing quadruple treatment", "Non-bismuth containing quadruple treatments", and "standard PPI based triple therapies". Also in this table please include all the other regimens mentioned in the paper. Please include the drug doses and recommended durations. This will make this a more useful reference for clinicians.

-> Table was added for more useful information and better understanding for the readers as recommendation.

Reviewer No. 00227386

1. The references need checking. In the text they jump from 3 to 7-9. I cannot find references no 4 or 5, and reference no 6 first follows reference no 13 on page 6.

-> Thank you for pointing out the important things. However, the reference number 4~6 is located in the 11th line of the introduction paragraph. Authors rechecked the order of references.

2. On page 9 under Novel Quadruple Therapy it is not clear what is the actual combination of treatments being

discussed.

->More explanation was added at the last part of the paragraph. "At this time, this regimen cannot be included in the quinolone based or rifabutin based therapy. It seems to be the one example of culture based therapy."

3. The information in Table 2 should probably precede Table 1.

->The order of the tables was corrected as the recommendation.

Reviewer No. 00008231

This narrative review try to evaluate the state of art of enhance eradication rate of *Helicobacter pylori* infection. However the authors are not able to powerfully synthetize and discuss the clinical scenario of *H pylori* cure, limiting to a scholastic enumeration of the all possible therapeutic regimens. Thus the review's usefulness for the readers is questionable. Particularly speculative is the full chapter entitled ADJUVANT THERAPY, where are included single study or trial without statitital difference vs control. This chapter is misleading for the physician.

->Thank you for pointing out the important limitations of this review. However, authors did not mean to discuss or powerfully synthesize the *H. pylori* cure in this review. At this time, there is no uniform regimen for the *H. pylori* eradication, although the circumstances are different among the geographic areas. Authors wanted to give the information about new attempts. Thus, we could not present the powerful evidences or definite conclusions. And in some study field, only a single study or trial could be the important implication for the following research or development of new treatments. So authors included only a single study in some paragraph. Authors admit that indefinite conclusion is the li mitation of this review as reviewer pointed out. To avoid the misleading for the readers, we added more explanations indicating the new attempts cannot be a mainstay of treatments now.

Reviewer No. 00039434

This article reviews the first-line eradication regimens according to the updated consensus guidelines and introduces novel regimens or attempts to enhance the eradication rate of *H. pylori*. This is very interesting. Great topic pertinence in Gastroenterology field. Good presentat ion and readability of the manuscript. The topic is highly actual.

Reviewer No. 00039306

In this review authors carefully addressed the issue of the treatment of *Helicobacter pylori* infection. Current recommended first line treatments according to the most important guidelines are discussed as well as the relevant studies supporting these regimens, other therapeutic options, and novel approaches. It is well written and clear, providing the reader with a comprehensive and updated knowledge in the field.

Reviewer No. 00503433

The manuscript entitled: "Attempts to enhance eradication rate of *Helicobacter pylori* infection"

attempts to review various anti-*H. pylori* eradication treatments and the existing antibiotic resistance. But the review is overly generalized and indeterminate. It is recommended that each subsection should end in a conclusive statement, identifying the pros and cons of each treatment protocol. It is also recommended that the rates of antibiotic resistance in different geographic locations be presented in a uniform table, to which the text should refer and come to a firm statistics-based conclusion regarding each antibiotic. The abstract should then be rewritten in conclusive terms including rates and recommendations. In addition the review should end in a conclusion paragraph summarizing the findings and highlighting the authors' recommendations.

->Authors appreciate that reviewer pointed out the important limitations of this review. However, authors did not mean to present the information about definite *H. pylori* cure in this review. At this time, there is no uniform regimen for the *H. pylori* eradication, although the circumstances are different among the geographic areas. Authors wanted to give the information only confined to new attempts. Thus, we could not present the powerful evidences or definite conclusions. In some section, there are insufficient evidences to conclude pros and cons of some therapy. In terms of the antibiotic resistance, the investigated resistance rates cannot represent the whole geographic area and heterogeneous methods were used to check the resistance as authors mentioned in this review. Thus, authors addressed about that but did not included the table or definite number that could mislead the readers. Authors admit that indeterminate conclusion is the limitation of this review as reviewer pointed out. Although this review takes narrative enumeration review form, we added conclusion paragraph as the reviewer's recommendation.

Thank you again for pointed out the important issues about this manuscript.

Sincerely yours,

Chang Seok Bang, M.D.
Dept. of Internal Medicine
Hallym University College of Medicine
Chuncheon Sacred Heart Hospital
153, Gyo-dong, Chuncheon, Gangwon-do
200-704, South Korea
Tel.: +82-33-240-5000
Fax: +82-33-241-8064
E-mail: cloudslove@naver.com

Gwang Ho Baik, M.D.
Dept. of Internal Medicine
Hallym University College of Medicine
Chuncheon Sacred Heart Hospital
153, Gyo-dong, Chuncheon, Gangwon-do
200-704, South Korea
Tel.: +82-33-240-5821
Fax: +82-33-241-8064
E-mail: baikgh@hallym.ac.kr

