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Managing Editor
World Journal of Gastroenterology
Baishideng Publishing Group Inc
7041 Koll Center Parkway, Suite 160,
Pleasanton, CA 94566, USA

Re: Manuscript NO: 74872

Dear Editor:

It is my great pleasure to send in the revised manuscript entitled "*Gastric mucosal precancerous lesions in Helicobacter pylori-infected pediatric patients in central China, a single-center, retrospective investigation*" to World Journal of Gastroenterology for evaluation.

The manuscript has been revised based according to reviewers' suggestions, a point-by-point reply to the reviewer's question is also provided in the next 6 pages. As required, this manuscript was proofread by service from filipodia Publishing Company, both the lock and unlocked version was submitted. The edit has achieved Grade A: priority publishing; no language polishing required after editing.

The highlighted sentences in the text of this unlocked version were corresponding to the reply of this "Answering Reviewer" letters. We hope this revised version will satisfy both editors and reviewers. In addition, the required accompanying documents are also uploaded via the F6Publishing system for your information.

- (1) 74872-Answering Reviewers
- (2) 74872-Audio Core Tip
- (3) 74872-Biostatistics Review Certificate
- (4) 74872-Conflict-of-Interest Disclosure Form
- (5) 74872-Copyright License Agreement
- (6) 74872-Approved Grant Application Form(s) or Funding Agency Copy of any Approval Document(s)
- (7) 74872-Signed Informed Consent Form(s) or Document(s)
- (8) 74872-Institutional Review Board Approval Form or Document
- (9) 74872-Non-Native Speakers of English Editing Certificate
- (10) 74872-Video

- (11) 74872-Image File
- (12) 74872-Table File
- (13) 74872-Supplementary Material

Thank you very much for your time and attention, and hope the manuscript can be favorably considered!

With Best Regards,
Sincerely yours,

A handwritten signature in black ink, appearing to read 'Dingsongze'.

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Reviewer 1 Date: 2022-01-24 20:47

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: It is well written and structured but similarity rate is 25%. You need to decrease similarity rate of your manuscript.

Author reply to reviewer:

Authors are grateful to the reviewers for the comments, and have extensively revised the text. These revisions will reduce the manuscript's similarity rate. Authors thank the reviewer for their helpful advices, and their time, attention to make the manuscript a much better shape.

Reviewer 2 Date: 2022-01-24 14:49

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Reviewer #2: - The manuscript have aim that clearly, authors investigate gastric mucosal precancerous lesions in children. However, the strengthening points why gastric mucosal precancerous lesions must have been investigated so weak and limit. Discussion about variables that are not significant also not yet visible, the authors focus still in significant's variables. It(is) make the manuscript poor of critical analysis. Please give critical rationale to analyze all results, in the discussion section author can give their perspective and show how critical they are.

Author reply to reviewer:

Authors are very grateful to the reviewers for his/her helpful advices, and the time, attention and efforts spent to make the manuscript a much better shape, and these advices are indeed very helpful and important! We have made proper modifications based upon the reviewer's advice in the following specific questions.

Abstract

- *The abstract is weak of background. Add the important points to support why the gastric mucosal precancerous lesions condition in children and adolescents must be investigated*

Author reply to reviewer:

We have added a full sentence at the beginning of the abstract to strengthen the background; it reads “*Helicobacter pylori* (*H. pylori*) infected about 50% of the world population and is the major cause of chronic gastritis, peptic ulcer and gastric cancer”, in page 3, lines 65-66 for information.

Background

- *Overall author states the background of the study as the foundation to explain H. pylori infection in children and also to deliver objectives of the study. The author can improve the strength of the background with data about the prevalence of H. pylori infection in children and adolescents from the previous study. After state about prevalence, the author can describe the H. pylori infection can cause gastric malignancy such as gastric atrophy, gastric mucosal inflammation, etc. Please kindly check (PMID: 29084246) the study that investigated H. pylori virulence in gastric mucosal and the relationship between demographic, sanitation, and H. pylori infection.*
- *The fourth paragraph of the introduction (Line 136-147; page 5-6) suggests moving to above the second paragraph to show the readers that the previous study has been found H. pylori infection can cause many problems in gastric.*

Author reply to reviewer:

Authors are very grateful to the reviewer for the very thoughtful advices, and have reorganized the full introduction part, by adding a new 2nd paragraph and new sentences to improve the background.

A new second paragraph was added to improve the background information, and have moved the fourth paragraph to the third paragraph to show the readers that the previously study has been found H. pylori infection can cause precancerous lesions in gastric mucosa, in page 5, lines 135-153 for information.

The new sentences are in page 6, lines 163-164 for information. This will greatly improve the background information and connections between the previously study and the rational for the current work. Thanks!

- *In the introduction necessary to detail explain the process, conditions, and indicators to justification the gastric mucosal precancerous lesions condition especially in children and adolescents so important to be investigated.*

Author reply to reviewer:

Following the reviewer’s advices, this is described in the last paragraph, in page 6, line 168-169.

- *In the introduction authors mentioned gastric atrophy incidence in children. What is the relevance with gastric mucosal precancerous or gastric cancer or H. pylori infection? Please kindly check in an article published (PMID: 26625820)*

Author reply to reviewer:

We have checked the article mentioned by reviewer and are happy to found that it is very helpful to improve the quality of the manuscript and have therefore cited this work in the manuscript (ref #5, #12) in page 5, lines 141.

5 Methods.

- *The numbers of patients according to age are not necessary mentioned in the method. Please kindly to move the precentage subject based on their age category to result section (Check Line 184-185; page 7)*

Author reply to reviewer:

Following the reviewer's advices, we have moved the percentage subject based on their age category to the results section, in page 9, lines 259-260, and the information is also shown in tables 2-6. Thanks!

6 Results.

- *The result describes the findings of the study and can demonstrate the rate of H.pylori infection and also gastric mucosal precancerous lesions condition in infected children and adolescents. The Result appropriate the aim of the study*

Author reply to reviewer:

Authors thank the reviewer's for the helpful advices, these suggestions helped to improve the quality of the manuscript, thanks!

7 Discussion.

- *The discussion should be describe the finding and not repeat the result. For example in Line 305-309; page 11, please delete and check in another paragraph. If there is still mentioned the number or percentage of result, please delete it. Present the number/ percentage allow to show the result of the previous study*
- *Line 308-309 page 11, the percentage not necessary in discussion. Please kindly move to Result*

Author reply to reviewer:

Authors thank the reviewer's for the helpful advices, these suggestions were full adopted and the paragraph was rewrote and is now more concise and up-to-date in page 11, lines 315-321, thanks!

- *The flow of discussion should following the result subheading such as Patients' characteristics and clinical data, gastric mucosal precancerous lesions in different age groups, and support by literature. So, result and discussion can syncron.*

- *To support discussion content about H.pylori induced inflammation, please kindly check PMID: 29069889 about role of CagA in gastric inflammation.*

Author reply to reviewer:

Authors are very grateful to very helpful advices, and have reorganized the discussion part following the order as listed above by the reviewer, from endoscopy features →to inflammation→ precancerous changes → discussion; and now it is more concise and up-to-date in page 11, lines 322-page 12, lines 341. In addition we have searched PMID: 29069889 and found it is very helpful and have cited this work in page 5 lines 140-141 (ref12), we also discussed the significance of CagA in inflammation and carcinogenesis in page 5 lines 140-141 and in page 11, lines 337-340. Thanks!

8 Illustrations and tables.

- *Illustrations and tables sufficient to portray the findings of the study.*
- *Please write down the P-value in Table 1 don't only mention <0.05. To indicate that the P value <0.05 please add (*) in the end of value and add footnote in the bottom of the Table to describe the meaning of the symbol (*). Please kindly check in the published paper*

Author reply to reviewer:

Authors thank the reviewer's for the helpful advices, these suggestions were full adopted and Table 1, table 4, 5, 6 were all changed accordingly, thanks!

- *The number of table is more than 4 table. We suggest author can merge Table 5 and 6 be one table.*
- *Please kindly check Table 3, mostly the non-infected subjects not undergoes Precancerous lesions are zero. We suggest to the author just mention the numbers in the text and not necessarily arrange them in the table. Therefore, in Table 3 we give the advice to deleted.*

Author reply to reviewer:

Authors thank the reviewer's helpful advices, and have merged table 5 and 6 into one table, but after checking back, we realized that merged table has too many information, and font size is also very small, it is also hard for readers to read them and absorb the information, we therefore, have put the original format for reader's convenience, but we have put this merged merged table 5 and 6 in the 2nd next page for reviewer's information.

For Table 3, we also followed reviewer's advices and deleted those zeros, but after we check back, we also realize that the original one may be easier for reader to compare the difference of the two groups, we therefore, bring back the original one in the manuscript, thanks!

- *The manuscript have aim that clearly, authors investigate gastric mucosal precancerous lesions in children. However, the strengthening points why gastric mucosal precancerous lesions must have been*

investigated so weak and limit. Discussion about variables that are not significant also not yet visible, the authors focus still in significant's variables. It is make the manuscript poor of critical analysis.

Author reply to reviewer:

Authors are very grateful to the reviewers for his/her helpful advices, and the time, attention and efforts spent to make the manuscript a much better shape, and these advices are indeed very helpful and important! We have made proper modifications based upon the reviewer's advice in the following specific questions. We hope this will improve the overall quality of the manuscript and satisfy both the reviewer and editors. Thanks!

Merged Table 5 Degree of neutrophil granulocyte and lymphocyte infiltration in Helicobacter pylori positive and negative patients

Age groups	<i>H. pylori</i> +					<i>H. pylori</i> -					Z	P
	N	Absent	Mild	Moderate	Marked	N	Absent	Mild	Moderate	Marked		
	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)		
NE												
1-4	22	19 (86.36%)	3 (13.64%)	0 (0%)	-	32	30 (93.75%)	2 (6.25%)	0 (0%)	-	0.912	0.362
5-8	156	133 (85.26%)	21 (13.46%)	2 (1.28%)	-	43	42 (97.67%)	1 (2.33%)	0 (0%)	-	2.212	0.027*
9-12	383	331 (86.42%)	44 (11.49%)	8 (2.09%)	-	52	50 (96.15%)	2 (3.85%)	0 (0%)	-	2.009	0.045*
13-18	293	234 (79.86%)	48 (16.38%)	11 (3.76%)	-	34	33 (97.06%)	1 (2.94%)	0 (0%)	-	2.456	0.014*
Total	854	717 (83.96%)	116 (13.58%)	21 (2.46%)	-	161	155 (96.27%)	6 (3.73%)	0 (0%)	-	4.319	<0.001*
L												
1-4	22	-	10 (45.45%)	11 (50%)	1 (4.55%)	32	-	17 (53.12%)	14 (43.75%)	1 (3.13%)	0.57	0.569
5-8	156	-	67 (42.95%)	75 (48.08%)	14 (8.97%)	43	-	24 (55.81%)	18 (41.86%)	1 (2.33%)	1.737	0.082
9-12	383	-	161 (42.04%)	195 (50.91%)	27 (7.05%)	52	-	31 (59.62%)	20 (38.46%)	1 (1.92%)	2.539	0.011*
13-18	293	-	112 (38.23%)	151 (51.54%)	30(10.24%)	34	-	19 (55.88%)	14 (41.18%)	1 (2.94%)	2.164	0.030*
Total	854	-	350 (40.98%)	432 (50.59%)	72 (8.43%)	161	-	91 (56.52%)	66 (40.99%)	4 (2.48%)	3.997	<0.001*