



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 49445

**Title:** OPTIMIZING PROTON PUMP INHIBITORS IN HELICOBACTER PYLORI TREATMENT: OLD AND NEW TRICKS TO IMPROVE EFFECTIVENESS

**Reviewer's code:** 03008931

**Reviewer's country:** China

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-05-31 06:10

**Reviewer performed review:** 2019-06-02 04:11

**Review time:** 1 Day and 22 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

This work by Drs. Ierardi et al., provide an mini-review focusing on the effects of proton pump inhibitors in Helicobacter pylori (Hp) treatment, involving various treatment strategy using PPI. Authors searched recent literature and tried to present latest



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advance this area. Extensive efforts have been made to provide Hp-infected patients a reliable regimen for bacteria eradication, therefore further effort in these areas are desirable. This work is therefore interesting with merit. The manuscript appears well wrote and framed, but some important data are from several years ago, and missing the latest information. The study of roles of high dose PPI vs routine dose PPI in Hp eradication is fast paced and is currently not conclusive. It is advised that authors revise the manuscript to focus on the main purpose and present latest advances and conclusions to guild this area moving forward, especially in the era of antibiotic resistance. In addition, a number of minor grammatical errors and typos are found throughout the text, which deserves authors' attention. The work may require revision to summarize not only current advance but should also point out research directions to guide future work in the field. Authors are encouraged to revise and make manuscript more informative and attractive.

#### **ANSWER**

As the reviewer requested, we updated the manuscript after performing a search within recently published articles.

In Taiwan, an optimized dual therapy with esomeprazole 40 mg tid plus amoxicillin 750 mg qid showed an effectiveness of the 91.7%, higher, even if not significantly ( $p=0.21$ ), than that of concomitant regimen, which displayed an outcome of the 86.7% (Tai WC, Liang CM, Kuo CM, Huang PY, Wu CK, Yang SC, Kuo YH, Lin MT, Lee CH, Hsu CN, Wu KL, Hu TH, Chuah SK. A 14 day esomeprazole- and amoxicillin-containing high-dose dual therapy regimen achieves a high eradication rate as first-line anti-Helicobacter pylori treatment in Taiwan: a prospective randomized trial. *J Antimicrob Chemother* 2019;74(6):1718-1724. doi: 10.1093/jac/dkz046. PMID: 30768161). Additionally, the same high-dose PPI-amoxicillin dual therapy achieved a very satisfactory eradication rate (96.1%) in China (Yu L, Luo L, Long X, Liang X, Ji Y,



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Graham DY, Lu H. High-dose PPI-amoxicillin dual therapy with or without bismuth for first-line *Helicobacter pylori* therapy: A randomized trial. *Helicobacter* 2019;24(4):e12596. doi: 10.1111/hel.12596. PMID: 31111580).

These recent evidences suggest that increasing PPI doses may have the power to reach an effectiveness similar to that obtained by adding further antibiotics (Gisbert JP, McNicholl AG. Optimization strategies aimed to increase the efficacy of *H. pylori* eradication therapies. *Helicobacter* 2017;22(4). doi: 10.1111/hel.12392. PMID: 28464347).

Additionally, some novel formulations such as modified release-dexlansoprazole, and instant release-omeprazole or tenatoprazole, which may increase the control of intragastric pH especially at night, are under investigation. However, they have not been tested yet for *H. pylori* despite they represent an excellent starting point for future investigations (Hunt RH, Scarpignato C. Potent Acid Suppression with PPIs and P-CABs: What's New? *Curr Treat Options Gastroenterol* 2018;16(4):570-590. doi: 10.1007/s11938-018-0206-y. PMID: 30361857)

Unfortunately, we were unable to update the data about PPI pre-treatment presumably because the well established ineffectiveness of this strategy discouraged the development of novel trials.

Finally, we met the request of “conclusions to guild this area moving forward, especially in the era of antibiotic resistance”. Therefore, we concluded that approaches which could bypass the problem of antibiotic resistance, such as PPI optimization, could be an useful ace up your sleeve. In particular, the creation of novel and more effective and powerful PPIs could be an additional weapon against *H. pylori*. Finally, the marketing of Vonoprazan in Western countries is expected to confirm its stunning results in the far East countries.

At last, a linguistic revision was performed to correct grammar errors and misspellings.



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#### INITIAL REVIEW OF THE MANUSCRIPT

##### *Google Search:*

- The same title
- Duplicate publication
- Plagiarism
- No

##### *BPG Search:*

- The same title
- Duplicate publication
- Plagiarism
- No



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 49445

**Title:** OPTIMIZING PROTON PUMP INHIBITORS IN HELICOBACTER PYLORI  
TREATMENT: OLD AND NEW TRICKS TO IMPROVE EFFECTIVENESS

**Reviewer's code:** 01557050

**Reviewer's country:** Japan

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-05-29 13:43

**Reviewer performed review:** 2019-06-03 10:14

**Review time:** 4 Days and 20 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

1) General comments Dr. Ierardi reviewed 'OPTIMIZING PROTON PUMP INHIBITORS IN HELICOBACTER PYLORI TREATMENT: OLD AND NEW TRICKS TO IMPROVE EFFECTIVENESS'. The article is informative and well-presented. The reviewer has no



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comments.

**ANSWER**

We are very pleased for the kind comments of the reviewer. Thank you very much.

**INITIAL REVIEW OF THE MANUSCRIPT**

***Google Search:***

- The same title
- Duplicate publication
- Plagiarism
- No

***BPG Search:***

- The same title
- Duplicate publication
- Plagiarism
- No