



ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 14422

Title: Pathophysiology of functional heartburn based on Rome III criteria in Japanese patients

Reviewer code: 00160002

Science editor: Ya-Juan Ma

Date sent for review: 2014-10-03 21:58

Date reviewed: 2014-10-31 19:22

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existing	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Dear Author: I have read your manuscript and like to congratulate you for this job that has been done in Japan. The study appears to be designed well and performed in good manner. However I like to give my comments and ask a few questions: ? Regarding the Rome foundation algorithm in the evaluation of these patients pH study is recommended before the manometry. In this study the manometry is done first. Is this because of the national program? Is there any other reason? If any reason for this, it should be clarified clearly and also mentioned in the manuscript. ? I think that it would be interesting also to see the comparison of the clinical data and presentation of the enrolled patients with those who had been excluded because of positive manometric findings. ? The study results are given mainly on the para-clinical data. One likes to have also the clinical data, namely the classical and extra-esophageal presentations as well. Did the patients have regurgitation too? Did they have upper and lower respiratory symptoms? If yes the probability of reflux disease may be predicted to be higher. ? In the inclusion of the patients those who have been given a single dose PPI have been included. Shouldn't you probably go for the double dose (like omeprazole 40 mg) and then include the patients for the study, as it is recommended in the Rome foundation criteria? ? Table 1 which is showing the framework of the whole group is not very useful and can be omitted, because Table 2 is sufficient and more useful. ? Tables 3 & 4 can be merged as they are showing the questionnaire data. ? The small numbers of patient group may be the reason for non-significant



BAISHIDENG PUBLISHING GROUP INC

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>

differences between the groups. ? In the abstract despite the several questionnaires it is better to mention the questionnaire names. ? Do you offer any clinical implication based on your study for the clinicians? Or this is mainly a study of theoretical importance?



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ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 14422

Title: Pathophysiology of functional heartburn based on Rome III criteria in Japanese patients

Reviewer code: 00183339

Science editor: Ya-Juan Ma

Date sent for review: 2014-10-03 21:58

Date reviewed: 2014-10-27 13:12

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This manuscript deals with "Pathophysiology of functional heartburn based on Rome III criteria in Japanese patients". The manuscript is well presented and of interest. I found no problem with it and it can contribute to increase the knowledge of this topic. All parts of the manuscript are well organized, and valuable conclusions are provided.



ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 14422

Title: Pathophysiology of functional heartburn based on Rome III criteria in Japanese patients

Reviewer code: 00004403

Science editor: Ya-Juan Ma

Date sent for review: 2014-10-03 21:58

Date reviewed: 2014-10-14 23:44

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existing	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This study has been carried out to assess the pathophysiological alterations of patients with functional heartburn and to compare them to those of the other subgroups of patients with NERD. The study is prospective and well done and an adequate number of patients has been recruited. All patients underwent 24-hour impedance-pH testing, while they continued to take PPI therapy, which failed to work, and some validated questionnaires were also administered to each of them to corroborate the diagnosis of GERD and the presence or not of psychopathology. Major comments - The Authors defined refractoriness on the basis of the lack of response to a single PPI dose. Perhaps the use of a double PPI dose would have been more suitable and rigorous to identify therapeutic failure - It is not clear which normal values for impedance-pH-metry were used - Why did the Authors use SI instead of SAP in order to correlate symptoms to reflux episodes ? The latter parameter seems to be more reliable - The differences between the Authors' and the Savarino's group findings are likely related to the fact that the latter ones were obtained by studying patients out of PPIs. However, these differences should be discussed more in depth - As to the proposed therapeutic regimens to be used in FH patients, the Authors should refer to a recently published review in this field (Savarino E et al, Nature Reviews Gastroenterol Hepatol 2013). Minor comments - English language must be improved - The introduction can be shortened by 1/3