Name of journal: World Journal of Gastroenterology

Manuscript NO: 71418

Title: Effect of Bifidobacterium longum 35624 on disease severity and quality of life in patients with irritable bowel syndrome

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 05864829

Position: Peer Reviewer

Academic degree: BMed, MM, PhD

Professional title: Statistician

Reviewer’s Country/Territory: China

Author’s Country/Territory: France

Manuscript submission date: 2021-09-07

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-14 06:07

Reviewer performed review: 2021-09-27 04:33

Review time: 12 Days and 22 Hours

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<th>[ ] Grade A: Excellent</th>
<th>[ ] Grade B: Very good</th>
<th>[ ] Grade C: Good</th>
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SPECIFIC COMMENTS TO AUTHORS
Thanks for inviting me to review this article 'Effect of Bifidobacterium longum 35624 on disease severity and quality of life in patients with irritable bowel syndrome'. The authors assessed the effect of B.longum 35624 on IBS patients using a real world study and the results showed that B.longum 35624 reduces IBS severity and improved the QoL particularly to those who have most severe symptoms. Major Although a real world study has better generality and external validity. The term itself will not change the characteristic of a study. I still feel confused about the so-called 'real-life'. In this study, all IBS patients after screening (who met pre-defiend inclusion criteria) received B.longum 35624, which mean that this is a typical interventional study without control group rather than an observational study. This study has no placebo or usual care control to avoid the placebo effect or the natrual regression processing of the disease. Moreover, the sample size is moderate compared with the real 'real world study'.The title and methods should clearly declare the study type. Minor 1. without a sample size estimation, we cannot ensure if your data have enough power. 2.IBS-U has only 12 sample with an obviously skewed distribution (-66±104.2 and 4.7±10.9 for IBS-SSS and IBS-QOL, respectively). Also for IBS-M population, I wondered if the data has a normal distribution? Maybe not. 3. too many figures illustrated same information which the tables have showed. Please re-structured figures and tables. 4. is there any adverse events data? 5. Some subgroup analysis such as figure 8 is hard to locate each subcategory. I highly recommend the author use forest plot to present subgroup data.
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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 05755618

Position: Peer Reviewer

Academic degree: FACP, MD

Professional title: Doctor

Reviewer’s Country/Territory: Japan

Author’s Country/Territory: France

Manuscript submission date: 2021-09-07

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-30 04:12

Reviewer performed review: 2021-10-03 14:56

Review time: 3 Days and 10 Hours

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| Re-review       | Y Yes                  | No                        |

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SPECIFIC COMMENTS TO AUTHORS
The authors described that relatively short-term treatment with B. longum 35624 reduces disease severity and improves patients' quality of life with IBS, especially patients with severe IBS in a real-world setting in France. It is a prospective, open-label, multicenter observational study. It is well-written and has good quality. However, there are some concerns about this article. 1. There is a lack of enough discussions of the mechanism of how B. longum 35624 reduces disease severity and symptoms in the article. Any cytokines or brain-gut axis are involved? 2. The authors may describe more details other medications already prescribed for IBS in the methods of this study. 3. Gut microbiota has racial differences. Although this is a French cohort study, please discusses this issue in the article.