



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_18719
Title of the Manuscript:	A review article on Helicobacter pylori antibiotic resistant profile in Iran
Type of the Article	Review Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



SDI Review Form 1.6

PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	1) Introduction, line19: rather than "eradication rate is lower than 80%", it is appropriate stating that "eradication rates are lower than 80% <u>in several areas</u> ". To my knowledge, global eradication rates remain higher than 80% (e.g., see L. Gatta BMJ 2013, or WHO reports) even though decreasing with a worrying trend.	Thank you for your time and consideration, the changes were written in this column. 1) But eradication rates are lower than 80% in several areas, due to patient's poor compliance or antibiotic resistance.



SDI Review Form 1.6

Minor REVISION comments	2) Resistance to Metronidazole, line 39: please specify the chemical differences between the active and the inactive form of Metronidazole. 3) Resistance to Metronidazole, lines 40 and following: it is not clear from the text whether these activities can be exerted on host or prokaryotic cells. 4) Resistance to Metronidazole, line 45: the sentence "... is more than developed once." is unclear: please rephrase. 5) Resistance to Furazolidone, line 217: the Authors write that side effects are "relatively high", but there are reports of "mild" (MR Ghadir J. Gastroenterol. 2011) or "no severe" (LY Gu Helicobacter 2011) side effects for treatments including furazolidone: are "relatively high" side effects specifically observed in Iran area? 6) Reference 7 seems not standard and outdated; I would suggest to quote a more recent and standard publication, if possible 7) Table 1: adding a row with the overall resistance could be useful to the reader	2 and 3). Metronidazole is administered in its inactive form (2-methyl-5-nitro-1H-imidazole-1-ethanol)[9]. It could be cytotoxic by transferring an electron from some metabolites such as ferredoxin (fdx A) to its nitro group in cytoplasm of anaerobic and micro-aerophilic pathogens. So, reduction of nitro group in inactive form of metronidazole, converts it to active form which has nitro free radical. 4) Prevalence of metronidazole-resistance <i>H. pylori</i> strains in developing countries (such as Iran) is more than developed countries. 5) Although using of high-dose of furazolidone has shown best results for <i>H. pylori</i> eradication therapy, but it should be used only in low-dose, because it has severe side effects in high dose [81]. 6) Thanks for your consideration. We changed reference 7. 7) Thanks for your kindly suggestion. But as it was mentioned in the text using different methods and different sample size was effective on the result of a study even during a same year, conclusion of an overall resistance in a separate column seems not possible(quality), in contrast we showed the province difference based on the antibiotic solely(quality) in Fig 1.
Optional/General comments	The manuscript reviews the data of <i>H. pylori</i> antibiotic resistance in Iran. A similar study has been published very recently (F Khademi et al, Iranian Journal of Basic Medical Sciences 2015), with quite high overlapping; however, the present manuscript includes new data (9	Thank you for your time and consideration. Based on your comments we have



SDI Review Form 1.6

	out of 23 references in table 1 are new) and more details on the mechanisms of action and the mechanisms of resistance for each antibiotic. Moreover, for each antibiotic, well-detailed geographic distribution of the resistance rates within the region are provided that can be of interest to the reader. Some refinement of language and phrasing is needed.	corrected all mentioned parts and highlighted them in the main file.
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