



SDI Review Form 1.6

Journal Name:	<u>British Journal of Medicine and Medical Research</u>
Manuscript Number:	2013_BJMMR_8391
Title of the Manuscript:	High Prevalence of Small Intestinal Bacterial Overgrowth in Lactose Intolerance Patients: is it a chicken and egg situation?
Type of the 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.

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PART 1: Review Comments

	Reviewer's comment	Author's comment <i>(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)</i>
Compulsory REVISION comments	<ol style="list-style-type: none"> 1. It is present some confusion about lactose malabsorption/intolerance definition: epidemiological data should be always related to prevalence (not incidence) of lactose malabsorption (not intolerance). 2. The control group is too small to suggest final considerations about epidemiology of lactose malabsorption: the expected prevalence of hypolactasia in a Mediterranean general population should range from 50 to 85%. A prevalence of only 6% in control group is too low and unlike if compared to that epidemiological reality. 3. The diagnostic concordance between LBHT and GHBT is a surprising and interesting result but the final prevalence of SIBO (in part based on the early positivity of only LHBT) is too high according to previous evidences in IBS (by GHBT). The authors have not considered the potential role of an accelerated oro-caecal transit on early peaks of hydrogen during LHBT. Moreover lactose and glucose have a different bowel metabolism as known. 	
Minor REVISION comments	<ol style="list-style-type: none"> 1. Genetic testing of hypolactasia needs biomolecular laboratories, but it is not so expensive as declared by authors. 2. Were patients with early positivity of LHBT also considered lactose malabsorbers? This fact is not 	



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	clear in the manuscript.	
Optional/General comments	This is an interesting study. In order to diagnose SIBO, a concordance between lactose and glucose breath testing is an important evidence, but this does not agree with previous evidences. Some methodological clarification is necessary. The SIBO prevalence could be overestimate.	

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