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OPEN PEER REVIEW

Diagnostic Value of Ultrasound Findings in Eosinophilic Esophagitis Versus Gastroesophageal Reflux Disease in Children

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1 Original submission

0 comments

No public comments in this round.

2

Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Reply to reviewer

Reviewer 1

1-Ultrasound has the ability to help in the diagnosis of GERD and esophagitis by measuring parameters such as the diameter and thickness of the esophageal wall in the cervical, thoracic, and abdominal regions, as well as measuring the length of the abdominal esophagus and the distensibility of the esophagus at different points. [23]

A comprehensive literature review has shown that in infants and children, unlike adults, ultrasound has a high sensitivity of 87% and an average specificity of 63% compared to the gold standard of 24-hour ph meter in diagnosing GERD, the sensitivity of which increases with the use of Doppler ultrasound. [14]

So, thanks to its non-invasiveness and high reproducibility, gastrointestinal ultrasound can investigate the functional and structural processes of the gastrointestinal tract, including GERD and EOE, and the response to treatment over time.

2- Between 10% and 33% of children diagnosed with EoE have normal esophageal mucosa with Endoscopic evaluation And the common findings of adults, such as esophageal stricture are rarely seen in children. Consequently, in children, the useful features of adult endoscopy alone do not make a reliable diagnosis of EoE or assess disease activity, and adult-like scoring has less role in diagnosing or evaluating response to treatment. [20, 21]

In this study, the aim is to evaluate the sonographic findings of the esophagus in known cases, and its compatibility with the endoscopic findings is not considered.

If in this study or in subsequent studies, it is shown that ultrasound is helpful in the initial diagnosis or follow-up of response to treatment in patients with EOE, the concordance of endoscopic and sonographic findings can be measured in subsequent studies.

3-The purpose of this study is to investigate the possibility of replacing a non-invasive method with standard invasive methods such as endoscopy. Certainly, if we are going to choose an invasive method, pathological and endoscopic criteria are the definitive diagnostic method.

4- Considering that ultrasound is a non-invasive method and is the only method that has not been used and it has been performed at the same time and in addition to endoscopic examination in patients, and its costs have been paid by the organizers of the project and informed consent has been obtained from the parents, it does not seem It contradicts the principles of ethics.

5- Relevant and newly published references were cited. [2, 5, 11, 14, 20, 21, 24]

Reviewer 2

1- The reviewer's comment was modified in the manuscript and the desired changes were highlighted.

2- Considering that the purpose of this study is to measure the ultrasound parameters of the esophagus in patients with EOE and compare them with the findings of healthy individuals and patients with GERD, in case specific and discriminating findings in EOE are discovered in the future, this method is used for the initial diagnosis or Patient follow-up can be used.

3- No, the data of this study will be stored and will probably be used in a separate research project.

2 Revision 1

1 comment · 7 Aug 2022

Referee 1 Reviewer

ACCEPT 7 Aug 2022

It's my pleasure to conduct this review.
The revisions to this manuscript are satisfactory, and this article is suitable for publication.