Reviewer's report

Title: Efficacy of Rifabutin-based Triple Teraphy as Second-line to Eradicate Helicobacter Pylori Infection

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Reviewer: TJ Borody

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The revised manuscript is a significant improvement from the original but continues to be inadequate. The Abstract should contain an appropriate ‘Conclusion’ and not ‘Discussion’ as stated. If this is a typo mistake then it is at odds with the authors’ conclusion described on Page 9, which contains a true statement that ‘rifabutin regimen applied for 7 days was not found to be effective as a second line rescue treatment ……’. Also, the Abstract should ideally list the amounts of drug used so that a reader can glean the data at a glance.

The weakness of this study remains in the design in that the authors used low doses of accompanying drugs as a rifabutin-based treatment regimen – in such doses clearly known to be ineffective - from results of several past studies to compare with a standard QT regimen. For this reason, the authors may have come to a false conclusion that rifabutin regimen is inferior to QT. This needs to be better addressed.

The authors have addressed some of the key issues raised in the previous report although the basis for using a rifabutin treatment regimen that is destined to give poor results for failed eradication has not been adequately discussed. For example the discussion of Ref 28 [Borody et al] previously suggested indicates the Authors missed the point of that paper. That paper does not suggest that a longer treatment might be better but it specifies that in spite of using low dose of rifabutin high eradication could be achieved through markedly increasing the amoxicillin dose [50-100% more over published figures] and the proton pump inhibitor dose [100-300% equivalent]. Otherwise the readers with take away the message that ANY rifabutin based therapy is ineffective. The Authors need to make the point that under-dosing with the amoxicillin and PPI’s might be the cause of poor results…and that better dosing should be sought…using comparative studies. That would be an acceptable story and publishable. A matter of adjusting the conclusions.