Reviewer's report

Title: A flow visualization model of duodenogastric reflux after esophagectomy with gastric interposition

Version: 1 Date: 9 May 2013

Reviewer: Iraklis Katsoulis

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Major Compulsory revisions:

While the methodology of the present work has been adequately presented the reference to the work of other authors needs a more comprehensive presentation. It is not true that duodenogastric reflux into the gastric conduit has been studied by the use of indirect techniques only. The authors have ignored the bilirubin monitoring with the device Bilitec that Katsoulis et al (reference no 8) applied to patients with PM or RS gastric conduits after esophagectomy (without pyloric drainage in either group). That method is considered the most reliable for detection of duodenal reflux in the clinical setting (Barrett MW et al. Detection of bile reflux: in vivo validation of the Bilitec fiberoptic system. Dis Esophagus 2000;13:44-50). Katsoulis et al found that bile reflux into RS gastric conduit was significantly lower than reflux into PM gastric conduit which is in accordance with the findings of the present study.

It is true that many conditions may affect DGER and interfere with the results in the clinical setting. The authors have developed a laboratory gastric tube model in order to eliminate the interference of such conditions. Although this is a very interesting concept, future studies of reflux in the clinical setting and in correlation with symptoms, endoscopic and histological findings may give more comprehensive information. This consideration has to be mentioned in the discussion.

Minor Revisions:

Few spelling mistakes such as pylous instead of pylorous (page no 8)

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that I have no competing interests