Reviewer's report

Title: Erosive esophageal reflux vs. non erosive esophageal reflux: Oral findings in 71 patients

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Reviewer: Brian Muzyka

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This is a well written communication on the investigation of the oral effects of ERD vs NERD patients treated with PPI.

I enjoyed reading it. The writing style was clear and generally ideas were communicated well.

The paper does have several areas I feel should be addressed (major revision).

The authors should define the term "acidic lesions". The term is used several times and only defined at the end of the manuscript (erythema and/or ulcer). I had no concept of what lesions were included in the definition of acidic lesions until the end of the manuscript.

The authors should state on line 75 that palatal lesions were demonstrated histologically in rats and then should discuss if this is a finding in humans or is it a model used in research that is applied to human subjects.

In my opinion it is patronizing to use the term "suffering from" when describing any medical condition (line 113). The authors should use a more objective term such as history of alcohol or illicit drug use (not use).

I am not sure why the authors failed to collect information on cigarette use such as quantity smoked daily and years patient has smoked. Additionally the authors did not collect information on other forms of tobacco such as spit tobacco, cigars? and pipes?.

I am not sure how the information on smoking is relative to anything if we don't know form of tobacco used, frequency and chronicity of use of tobacco.

I am surprised that the authors did not collect information on last dental visit or whether the patients routinely assess preventative dental care (such as dental prophylaxis). Perhaps the finding of periodontal disease in this population studies are not representative of the general population. Perhaps the findings of the study participants may be attributed to lack of accessing routine dental care including dental prophylaxis. This seems to be a major flaw and significantly weakens the stated association of periodontal destruction.

Line 147 Planamesa Inc address is incorrect. there is no town in California named Anytown. The correct location for Planamesa Software is in Sunnyvale, California, USA (http://www.aboutus.org/Planamesa.com).
Define conservative prosthetic dental reconstructions. I am not familiar with the term. What does it included? Operative dentistry, fixed full and partial coverage restorations?

In regards to defining periodontal disease, there are more parameters than CAL. The authors, in my opinion, need to discuss these parameters and state why they are choosing to only use one of the criteria for defining periodontal disease. Attachment loss is representative of a chronic condition, use of PPI in this study population was of a limited duration. I do not make the implied connection of periodontal disease possibility and association with use of PPI.

A major flaw of this study is there is no objective assessment of the "acidic lesions". Erythema and ulceration of the oral mucosa is a very common finding with multiple confounding etiologies. How can the authors assure us that a finding of erythema or oral ulceration in a NERD or ERD patient is related to their diagnosis?

**Level of interest:** An article of limited interest

**Quality of written English:** Acceptable

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**

'I declare that I have no competing interests