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ANSWERING REVIEWERS

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46000

Title: Rare variant of pancreaticobiliary maljunction associated with pancreas divisum in a child diagnosed and treated with endoscopic retrograde cholangiopancreatography: a case report

Reviewer's code: 03563654

Reviewer's country: United States

Science editor: Ying Dou

Date sent for review: 2019-01-25

Date reviewed: 2019-01-25

Review time: 15 Hours

SPECIFIC COMMENTS TO AUTHORS

well written manuscript. i have some suggestions. 1- how is the follow up of patient? 2- "congenital hepatobiliary anomaly may coexist with thyroid and breast anomalies" (10.5152/ejbh.2018.4132) and (https://doi.org/10.1016/j.ijsu.2018.04.037) I suggest both of these uptodate studies for the references.

Answering to reviewer:

1. During the long-time follow up, periodic telephone call and outpatient visits were used to follow up;
2. Both of the uptodate studies (10.5152/ejbh.2018.4132) and (https://doi.org/10.1016/j.ijsu.2018.04.037) have been added for the references.

INITIAL REVIEW OF THE MANUSCRIPT

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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46000

Title: Rare variant of pancreaticobiliary maljunction associated with pancreas divisum in a child diagnosed and treated with endoscopic retrograde cholangiopancreatography: a case report

Reviewer's code: 02439973

Reviewer's country: Italy

Science editor: Ying Dou

Date sent for review: 2019-01-25

Date reviewed: 2019-01-31

Review time: 10 Hours, 6 Days

SPECIFIC COMMENTS TO AUTHORS

This is a very interesting case report, which is impressively descriptive with appropriate considerations. The text is well written. The pictures are clear and above all, considering that the case report is rare and can be difficult to interprete, both helpful and informative.

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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46000

Title: Rare variant of pancreaticobiliary maljunction associated with pancreas divisum in a child diagnosed and treated with endoscopic retrograde cholangiopancreatography: a case report

Reviewer's code: 00504150

Reviewer's country: Canada

Science editor: Ying Dou

Date sent for review: 2019-01-25

Date reviewed: 2019-01-31

Review time: 17 Hours, 6 Days

SPECIFIC COMMENTS TO AUTHORS

The manuscript entitled, "Rare variant pancreaticobiliary maljunction associated with pancreas divisum in a child diagnosed and treated with endoscopic retrograde chlangiopancreatography: a case report, is well written case report. From provided images and description, it is difficult to believe that dorsal duct was communicating with common bile duct. It is also unclear how the diagnosis of pancreas divisum was made. Did the authors detect a part of ventral duct? Clearer images should be provided to convince the readers.

Answering to reviewer:

First of all, thanks a lot for your kind comments.

During ERCP, after successful cannulation of the major papilla, we didn't detect an obvious ventral duct, according to the study by Klein et al. (Gastrointest Endosc. 2004

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Sep;60(3):419-25.), pancreas divisum(PD) has also several variations, among which one type drains almost the whole pancreatic juice through minor papilla, and the ventral duct doesn't communicate with the major papilla. Our case may have this variation of PD.

The CBD was incidentally detected when we injected contrast agent through the minor papilla, and at final step of ERCP, after placement of biliary stent through the major papilla, for further confirming the communication between CBD and dorsal duct, we successfully advanced the guidewire to the CBD through the minor papilla, which cannot be seen in normal condition. So we think there might exist a communication.

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