

## Reply to Reviewers:

1. "While, most of the major societies recommend early cholecystectomy for mild gallstone pancreatitis." is not comprehensible and doesn't make sense' -> This sentence seemed to be weak and was deleted.
2. between patients who underwent early cholecystectomy versus patient who underwent late cholecystectomy- sentence changed
3. The higher rate in Latin America was thought to be due to patients with biliary pancreatitis being admitted to surgery services primarily in that part of the world—rephrased
4. What was the decision of this definition based on? The term "Within 2 weeks of discharge" is very abstract since other patients might exit the hospital after 3 days of hospitalization and other might exit after 3-4 weeks if i.e. have related or unrelated complications during their hospitalization.--> Definition further refined to make it uniform 'early defined as cholecystectomy within 2 weeks of pancreatitis' as per previous metanalysis.
5. Inclusion/Exclusion Criteria: "In our meta-analysis mild pancreatitis was defined by either Ransons score <3, Atlanta classification or CT criteria." ♦ Please add references accordingly→References added
6. Biliary complications included recurrent pancreatitis, acute cholecystitis, acute cholangitis, biliary colic, jaundice, and common bile duct injury. Intraoperative complications included bile duct injury, and intra-operative bleeding requiring blood transfusion. Post op complications included bile leak, post-op bleeding requiring transfusion, pancreatitis, pseudocyst, pneumonia, PE or other systemic complications.->These complications were based on previous papers, references added.
7. Author contributions added
8. Original figures provided in a power point
9. Article highlights added