

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46546

Title: Causes associated with recurrent choledocholithiasis following therapeutic endoscopic retrograde cholangiopancreatography: A large sample sized retrospective study

Reviewer's code: 03474653

Reviewer's country: Sweden

Science editor: Fang-Fang Ji

Reviewer accepted review: 2019-02-18 17:19

Reviewer performed review: 2019-02-18 19:59

Review time: 2 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

A quite interesting and easy to follow study from the beginning to the end. Unfortunately the most of the results are well known and reported in previous publishes.



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The study has all the problems from a retrospective single center study but some comments comes here. 1. Are there any comments about the treatment method or strategy between patients with second and several instance recurrence. Any strategy?? Why the second category twice as bigger?? 2. In the core tips side the second sentence begins with wrong size. 3. Figure 1, Kaplan Meijer should absolutely presents in a bigger size so it is possible to follow the events.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ [Y] No

BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46546

Title: Causes associated with recurrent choledocholithiasis following therapeutic endoscopic retrograde cholangiopancreatography: A large sample sized retrospective study

Reviewer's code: 02468626

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Reviewer accepted review: 2019-02-19 06:36

Reviewer performed review: 2019-03-03 10:18

Review time: 12 Days and 3 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors should be congratulated on their extensive retrospective review on the recurrence of choledocholithiasis after therapeutic ERCP. Despite their incidence in



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many experienced centers, the causes for recurrent CBD stones are not completely understood yet. The pathophysiology of every independent risk factor of recurrence of choledocholithiasis has been exhaustively described and the results agree with the mentioned studies. Major remarks

Methods and study design

- 1) The original group of patients of the cohort who underwent ERCP is not described (number of patients, age range, demographics, patients who were excluded from the analysis, etc).
- 2) Timing of control for recurrence of choledocholithiasis has not been specified. In particular, it is not clear if every patient enrolled had imaging exam after a specific period post-therapeutic ERCP or if imaging exams have been done only after the appearance of new symptoms. In the latter event, a description of symptoms or/and laboratory findings that you decide to consider related to recurrence of choledocholithiasis should be described.
- 3) It has not been specified if patients without symptoms but with casual finding on laboratory text of cholestasis (and then confirmed by imaging) were enrolled.
- 4) It seems that endoscopic ultrasound was not adopted prior to ERCP. Please explain the reasons.
- 5) How was the control group selected?

Results and discussion

- 1) Median age-range for case and control group is not calculated. This data should be useful for both the interpretation of results and the study design.
- 2) Age greater than 65 years was found to be an independent risk factor for the development of recurrent choledocholithiasis after ERCP; I think that is useful for the interpretation of this results reporting in your tables the median age of case and control group and the age distribution in the entire cohort.
- 3) In table 1, in consideration of your results, maybe you should divide your group with the cut-off of 65 years (for example: <55, 55-65, 65-75, >75) and for every group report the number of patients included.
- 4) Please add a consideration that the greatest number of independent risk factors for choledocholithiasis recurrence is associated to ERCP-related factors and how, except for age, general patient characteristics are not related to recurrence.
- 5) Considerations about how past medical history, except for



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medical history related to biliary system such as cholecystectomy and CBD incision, and laboratory tests (ALT, AST, GGT, cholesterol, triglycerides, ..) are not related to recurrence, should also be added. Minor remarks 1) Introduction: please rephrase and clarify “choledocholithiasis is associated with bacteria, an abnormal biliary structure” 2) Materials/Patients: please rephrase “patients with stones that could not be removed during the first surgery” 3) Results/univariate: please rephrase and clarify “CBD incision”

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Name of journal: World Journal of Clinical Cases

Manuscript NO: 46546

Title: Causes associated with recurrent choledocholithiasis following therapeutic endoscopic retrograde cholangiopancreatography: A large sample sized retrospective study

Reviewer's code: 00034177

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Reviewer accepted review: 2019-02-18 13:26

Reviewer performed review: 2019-03-03 15:33

Review time: 13 Days and 2 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This paper is well written. Author's idea is very interesting, but results are not so useful and not new. So, author has to collect more data and analyze again. Especially,



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patient's back ground. Patient's preference, customs, habits, food, hyperlipidaemia and so on.

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