

Re: 54396

World Journal of Clinical Cases

Dear Editor,

We thank the editorial board for the comments about our manuscript (54396) entitled “ The fastest recurrence time for recurrent gallstone ileus: case report and literature review”. The manuscript has been thoroughly revised according to the reviewer’s comments.

We look forward to hearing your positive response to this revised manuscript.

Below are the answers to the reviewer’s comments.

Response to Reviewer 1 (reviewer code: 02551224):

Dear authors, the article entitled "The fastest recurrence time for recurrent gallstone ileus: case report and literature review", by Hao Jiang and colleagues from Taizhou Central Hospital in China, is a useful contribution to better define the clinical strategy in case of gallstone ileus. There are some linguisting imprecisions, but the case in the comlex is well documented and exposed. On the basis of this early recurrence, I would better stress the importance to perform surgery in one time, performing at least cholecystolithotomy, if cholecystectomy is difficult, whenever the clinical conditions allow this. I think it is always better a single longer operation than two ones

Answer: We are really appreciated your constructive comments. We have carefully revised the linguisting imprecisions, for details, please read the new manuscript. As you stressed, We decided to adopt single-stage surgery in the first place, however, the clinical conditions are not allowed to perform cholecystolithotomy. We deeply agree with your point of view,

therefore, in the discussion and conclusion of this manuscript, we emphasize the importance of cholecystolithotomy and cholecystectomy.

Response to Reviewer 2 (reviewer code: 03034605):

Comments 1. The title needs to be modified as mentioning fastest recurrence time doesn't look appropriate. Instead mentioning recurrent gallstone ileus is sufficient.

Answer: Thanks for the suggestion. We have changed the title to “A rare case of recurrent gallstone ileus: case report and literature review”.

Comments 2. Abstract - the background needs to be modified as easy to ignore is not the appropriate term.

Answer: We thank the reviewer’s constructive comments, we have revised it to “The management of recurrent gallstone ileus (GSI) is unsatisfactory”.

Comments 3. Introduction - Appropriately written.

Answer: Thanks for the suggestion, We have modified the introduction section appropriately, for details, please read the new manuscript.

Comments 4. Case presentation - What was the site of operation in the second surgery? Why was the hospital stay prolonged (20 days) after the second surgery? Please mention the site of bilioenteric fistula here as found during the operation.

Thanks for the suggestion, on the 9th day after the first operation,

laparotomy was performed along the original surgical incision, the stone is located in the place where the intestine is sutured during the first enterolithotomy.

Due to the the incision infection, and the patients was worried about poor recovery after operation, the hospital stay prolonged (20 days) after the second surgery.

It is a pity that the clinical conditions of the patients are not allowed to perform careful surgical exploration (the patient was elderly with severe adhesion of the right upper abdomen and unclear exposure of the gallbladder and duodenum), therefore, the site of bilioenteric fistula was not found during the operation.

The above contents have been revised in the new manuscript.

Comments 5. Please provide intraoperative images if available.

Answer: Thanks for the suggestion, because there is no photography equipment in the emergency operating room. It is a pity that there are no intraoperative photos. Fortunately, the typical CT picture can illustrate the patient's condition to some extent.

Comments 6. Discussion - Appropriately written.

Answer: We sincerely appreciate the reviewer's helpful comments, we have revised the discussion section appropriately, for details, please read the new manuscript.

Comments 7. Conclusion - it needs to be shortened to give only the take home message. I believe its important to emphasise about through examination of the bowel and gallbladder for gallstones based on preoperative imaging during first surgery and remove them ignorer to avoid recurrence.

Answer: We thank the reviewer's constructive comments, the conclusion is shorted as below.

We believe that through examination of the bowel and gallbladder for gallstones based on preoperative imaging during the first surgery and remove them as far as possible on the premise of ensuring the safety of patients is the effective strategy to reduce the recurrence of GSI.