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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 56977

Title: Traumatic neuroma of remnant cystic duct mimicking duodenal subepithelial tumor: A case report

Reviewer's code: 05039425

Position: Editorial Board

Academic degree: MD

Professional title: Doctor, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Italy

Author's Country/Territory: South Korea

Manuscript submission date: 2020-05-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-05-23 07:05

Reviewer performed review: 2020-05-23 07:19

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

You have reported a truly singular and particular case

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 56977

Title: Traumatic neuroma of remnant cystic duct mimicking duodenal subepithelial tumor: A case report

Reviewer's code: 04105454

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: South Korea

Manuscript submission date: 2020-05-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-05-23 09:52

Reviewer performed review: 2020-05-23 10:05

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

It is well written case presentation and to my mind you can emphasize on the conservative tt and follow up on asymptomatic b9 looking GIST like this case

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 56977

Title: Traumatic neuroma of remnant cystic duct mimicking duodenal subepithelial tumor: A case report

Reviewer's code: 03714071

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: South Korea

Manuscript submission date: 2020-05-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-05-23 22:23

Reviewer performed review: 2020-06-04 19:58

Review time: 11 Days and 21 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The paper entitled “Traumatic Neuroma of Remnant Cystic Duct Mimicking duodenal Subepithelial Tumor: Case Report” is well written and I think that the authors propose new concepts about Traumatic Neuroma of the bile cystic duct. One of these, is that EUS imaging alone is not recommended because of low accuracy for differential diagnosis of GST or TN. Therefore, different imaging examination tools (CT/EUS) and information on patients medical history associated to laboratory exams, should be comprehensively considered. This finding is well described in the “Conclusion” section. Another new concept suggested by this manuscript is a possible follow-up for each patient underwent cholecystectomy, even in asymptomatic cases and using for example abdominal ultrasound, to detect initial TN or GST. A limitation of this study is that the authors do not find out a single and specific diagnostic method to detect TN and to differentiate this one from GST/GIST/Neuroendocrine tumors. But it’s necessary to underline that it’s not feasible to reach this purpose with a single case-report: a greater sample size is necessary, even if TN is a rare pathology. The Title reflects perfectly the main subject of the manuscript. The Abstract is a good summary of the topics treated in the manuscript. The Key Words are adequate. The “Introduction” section provides useful informations to the readers. However, in this section, I suggest to add some references: • “Traumatic Bile Duct Neuroma Diagnosed by Boring Biopsy With Cholangioscopy. Toyonaga H, et al. *Gastrointest Endosc* 2018; 87(5):1361-1362”: this scientific article reports TN as a complication after biopsy with colangioscopy and not only after surgery. • “Traumatic Bile Duct Neuroma Presenting With Acute Cholangitis: A Case Report and Review of Literature. Lalchandani P, et al. *Ann Hepatobiliary Pancreat Surg* 2019; 23(3):282-285”: this study demonstrates that in some patients traumatic bile duct neuroma may present also with acute cholangitis. • “Extrahepatic Bile Duct Stricture and Elevated CA 19-9:

Malignant or Benign? Hyman J, et al. South Med J 2003; 96(1):89-92": in this case-report TN is reported associated to Ca 19-9 elevation although its benign nature. The "Case Presentation" section is very accurate and I think that the subdivision in various steps is very clear and of great impact. The "Discussion" section is well done and the References are up to date. Figures are very interesting and clear. The style, language and grammar of the manuscript are of good quality and appropriate.