



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 61655

Title: Early vs Late Cholecystectomy in Mild Gall stone Pancreatitis: An updated Meta-analysis and Review of literature

Reviewer's code: 00536689

Position: Editorial Board

Academic degree: MD

Professional title: Assistant Professor, Surgeon

Reviewer's Country/Territory: Italy

Author's Country/Territory: United States

Manuscript submission date: 2020-12-17

Reviewer chosen by: Li Ma

Reviewer accepted review: 2020-12-18 08:01

Reviewer performed review: 2020-12-21 07:04

Review time: 2 Days and 23 Hours

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 Grade E: Do not publish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 type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

I have read the manuscript very carefully. The topic is really interesting and still much debated in literature. The manuscript is well written. Good setting for the research of scientific publications. The introduction is well structured. The discussion is complete and exhaustive.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 61655

Title: Early vs Late Cholecystectomy in Mild Gall stone Pancreatitis: An updated Meta-analysis and Review of literature

Reviewer's code: 03830061

Position: Peer Reviewer

Academic degree: PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Greece

Author's Country/Territory: United States

Manuscript submission date: 2020-12-17

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-12-17 14:28

Reviewer performed review: 2020-12-21 07:51

Review time: 3 Days and 17 Hours

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 type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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SPECIFIC COMMENTS TO AUTHORS

This is a metanalysis investigating the timing (early vs delayed) of cholecystectomy in mild gall stone pancreatitis. The study concludes that early cholecystectomy leads to shorter hospital stay and shorter duration of surgery, while decreasing the risk of biliary complications. These conclusions seem to be justified although there are some limitations in the study which however seem to be clearly and properly mentioned. Title & short title: OK Abstract: - Background: - The sentence "While, most of the major societies recommend early cholecystectomy for mild gallstone pancreatitis." is not comprehensible and doesn't make sense. Please rephrase. - Aims: - ".....between patients who underwent early cholecystectomy versus patient who underwent late cholecystectomy." □ patients Introduction: -The sentence "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" is not comprehensible. Please rephrase. Material and Methods: - Study selection criteria: We looked at studies assessing outcomes of early (defined as cholecystectomy within the index admission or within 2 weeks of discharge) vs late cholecystectomy in patients with mild gallstone pancreatitis. □ 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. - 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. - "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



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op complications included bile leak, post-op bleeding requiring transfusion, pancreatitis, pseudocyst, pneumonia, PE or other systemic complications.” □ Where these complications based on certain criteria/references? Please specify. Results: OK Discussion: OK Conclusion: OK References: OK Figures: OK General comments: English revision needed. Typographical errors throughout the text.