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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3414

Title: Gallstone ileus: case report and literature review

Reviewer code: 00039545

Science editor: l.l.wen@wjgnet.com

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS:

This paper represents in general an interesting case of gallstone ileus. The paper is well written and well documented with figures. Nevertheless, the discussion can be improved in some parts: First: The presence of a fistula occurred in this patient. Interestingly no aerobilia which can be easily detected by transabdominal ultrasound and may be one reason for the delayed diagnosis. Additionally, the absence of significant calcification of the stone deteriorated an early diagnosis. Second: A paragraph to nonsurgical alternatives of special types gallstone ileus i.e. Bouveret's syndrome or stones in the stomach or the colon will enhance the review of gallstone ileus. This special locations are suitable for non-surgical therapeutic options in around 20% of the patients. For example laserlithotripsy in Bouveret's syndrome as described by Maiss et al (Scand J Gastroenterol 2004;39:791 - 794) or extracorporeal shock wave lithotripsy as described by Sackmann et al. (Dig Dis Sci 1991;36:1794 - 5) or even only endoscopic extraction as described by Bedogni et al (Gastrointest Endosc 1985;31:36 - 8) may be an promising and fast therapeutic alternative.