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## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Surgery

**ESPS manuscript NO:** 32756

**Title:** Acute calculous cholecystitis: Review of current best practices

**Reviewer's code:** 02445561

**Reviewer's country:** India

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2017-01-23 09:38

**Date reviewed:** 2017-01-23 21:22

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input checked="" type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

A good approach to a common problem.



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## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Surgery

**ESPS manuscript NO:** 32756

**Title:** Acute calculous cholecystitis: Review of current best practices

**Reviewer's code:** 01560521

**Reviewer's country:** China

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2017-01-23 09:38

**Date reviewed:** 2017-01-25 05:42

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

Your article is a good contribution addressing a common problem



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## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Surgery

**ESPS manuscript NO:** 32756

**Title:** Acute calculous cholecystitis: Review of current best practices

**Reviewer's code:** 01557877

**Reviewer's country:** Slovenia

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2017-01-23 09:38

**Date reviewed:** 2017-02-05 03:36

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input 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"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

Table 2 cited in text is missing. Figures about acute cholecystitis and established operative technique are not important for the paper. Language needs some polishing. Otherwise ok written paper, but I miss more systematic approach a lot.



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## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Surgery

**ESPS manuscript NO:** 32756

**Title:** Acute calculous cholecystitis: Review of current best practices

**Reviewer's code:** 02445571

**Reviewer's country:** China

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2017-01-23 09:38

**Date reviewed:** 2017-02-05 15:22

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

This paper reviewed the current therapeutic method for acute calculous cholecystitis (ACC). This review included the pathophysiology, diagnosis, and treatment. The varies specific criteria, severity scores, and guidelines were implemented and provided a practical and comprehensive review of the most important aspects of ACC, complications, and treatment. It is valuable to help the surgeons to manage the disease and to improve outcomes. Besides, the writing is good. References are accurate and dated.

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Surgery

**ESPS manuscript NO:** 32756

**Title:** Acute calculous cholecystitis: Review of current best practices

**Reviewer's code:** 02445547

**Reviewer's country:** Singapore

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2017-01-23 09:38

**Date reviewed:** 2017-02-14 14:57

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input 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"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
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		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

Dear Authors Great work to compile a literature. Would suggest minor edits to enhance the value to readers. 1. In Background section - i agree with 3-10% but disagree that 1/3rd of acute surgery patients is cholecystitis. What about appendix, abdominal pain, pancreatitis, diverticulitis, abscess etc whatever --- in real life this is not 1/3rd. So please remove that. 2. In Background the 5 x 20% is wrong as it means 100%. The risk is 5 times higher i.e. 20%. So amend it to clarify. 3. In background you have clarified ACC acronym and hence in second paragraph first line pls use the acronym. Please check this all along the manuscript and mention ACC for all subsequent usage. Also the spelling of 'cholecystitis' needs to be ammended from what you have stated. 4. In section on Acute Cholecystitis Severity you have stated two placed FIGURE 1. You should only keep at one place and delete from other place. Also you have stated table 2. Where is table 1? I saw only one table with the antibiotic thing. Clean this up. 5. In section on Imaging diagnosis - you have labelled CT scan as Figure 3a and 3b. Actually those are scintigraphy images and NOT CT SCAN IMAGES. So tidy this up please. 6. There are a numerous such formating errors that i propose the senior author to rectify. These are intuitively wrong formating, not using the acronyms even if there is already an



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acronym made etc, a lot. Clean this up and from now on i will not state such errors but focus on clinical content only. 7. In the section on assessing CBD stones - we need to cover the role of laparoscopic intraoperative ultrasound and also intraoperative cholangiogram. There is no mention of both in this section. I know that authors have stated IOC later in CBD stone management, but IOC also needs to be stated briefly in CBD stone detection paragraph. 8. In section - how to manage associated CBD stones - I encourage authors to discuss a bit more on - role of ERCP AND LCBDE being complimentary. Pubmed - Singapore Medical Journal -2012; 53(5) : 313. Its my paper. Its not to increase by citation, but i feel it is essential to emphasise that both are complimentary and have their own roles according to local resources and expertise. Please add this reference. 9. In section on laparoscopic or open approach for acute cholecystitis - please include a brief on (a) minicholecystectomy (small incision open), (b) reduced port cholecystectomy, (c) single port cholecystectomy (d) robotic cholecystectomy etc. Our article is meant to be a review of current literature and has to include all this. I know that most of this stuff is done in elective setting of biliary colic, but there is some data in acute cholecystitis too and this has to be covered in our paper. Also a very brief mention on using 3D laparoscopy and ICG camera to evaluate the CBD anatomy. There are reports of ICG camera system to delineate anatomy and this should be covered. 10. In the section on Timing of surgical treatment - third paragraph where TG13 philosophy of care is discussed - please also state that recently many authors have challenged the TG13 guidance on management and shown that it is safe even to perform early index admission lap chole for acute cholecystitis grade III severity and sometimes even grade 1 severity needs to be managed by percutaneous drainage due to underlying comorbidity. Here the reference that i suggest to add would be - PMID: 27804044. 11. In the section on Antimicrobials 2 needs need to be clarified. Frst - blood cultures are not always positive and many times the treatment is guided empirically based on local antibiogram - Ref PMID: 27733320 . The second thing is about local protocols based on local data and role of antibiotic stewardship programmes etc and AGORA initiative by WSES - Ref - PMID 27429642. 12. In the section on When to perform Percutaneous cholecystostomy - please include the largest published series on cholecystostomy - PMID - 26580708