

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 13817

**Title:** Biliary tract intraductal papillary mucinous neoplasm: report of 19 cases

**Reviewer code:** 00077138

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2014-09-03 09:20

**Date reviewed:** 2014-10-23 09:21

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existing	<input type="checkbox"/> High priority for publication
<input 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	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

My viewing period has expired... Therefore my comments below: The report by Wang et al. entitled 'Biliary tract intraductal papillary mucinous neoplasm: report of 19 cases' (13817) describes 19 cases of biliary tract intraductal papillary mucinous neoplasms (BT-IPMN) as a rare tumor entity among a total of 343 biliary tract tumors treated in the Department of Hepatopancreatobiliary Surgery of the West China Hospital in Chengdu between 2000 and 2013. The report nicely summarizes the single-center experience with 19 patients who presented with BT-IPMN, 10 of whom had a malignant and 9 a benign histology. The authors give a detailed account of the demographic data, the clinical presentation (predominantly abdominal pain and jaundice), the results of the imaging analyses, the types of surgical interventions and finally the clinical outcome, including a telephone interview follow-up every 6-12 months after surgery. The data are clearly presented and extensively discussed on the basis of the recent relevant international literature. Last but not least, the limitations of the study are pointed out (relatively small number of cases, retrospective design). In order to add to the substance of the paper and to better present their interesting findings, the authors should address the following points: 1. Overall the paper requires careful editorial attention with respect to English style, grammar, syntax etc. For example: Abstract, Results, line 3: Cholangitis was found... Abstract, Results, line 5: based on... Abstract, Results, line 8: involved the intrahepatic bile ducts... Abstract, Results, lines 8-9: As surgical interventions we performed... better than For tumor clearance... Abstract, Results, lines 11-13: One patient (5.3%)

was biopsied and received a choledochojejunostomy because of multiple tumors involving the right extrahepatic... Abstract, Results, line 13: Histology showed... Abstract, Results, lines 14-16: The benign cases showed a statistically non-significant trend towards improved survival ( $p = 0.347$ ). These aspects should be addressed throughout the manuscript, including the tables and figures. Table 1: range instead of rang Table 2: BT-IPMN; Multifocal instead of Multifocus Table 3: BT-IPMN; Intrahepatic, Extrahepatic, Intra- and extrahepatic; intraoperative choledochoscopy instead of choledochoscope; in addition see comment 2 below. Table 4: BT-IPMN; Malignant instead of Malignancy Fig. 1: ...originating from the extrahepatic biliary tract. Fig. 2: ...in the distal (not distant) common bile duct ... throughout the bile duct. Fig. 4: ...with malignant multifocal (not diffused) BT-IPMN... References instead of Reference Journal abbreviations should be in line with the WJG guidelines. 2. The paragraph 'Radiologic Characteristics' in the result section should read 'Imaging Analyses' because ultrasonography is not a radiologic procedure. Accordingly, the paragraph needs to be rephrased and Table 3 should be modified, including the title. 3. 12/19 BT-IPMN patients had biliary stones. Were the stones located in the area of the BT-IPMN? Were the biliary stones associated with a cholecystolithiasis? For the clinician this information may be of interest. 4. Somewhat puzzling is the statistically non-significantly different outcome of patients with benign and malignant BT-IPMN, respectively. Is there an explanation for this observation? Sample size? What was the cause of death in patients with BT-IPMN? A short comment in the 'Discussion' would be helpful.

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**Name of journal:** World Journal of Gastroenterology

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**Title:** Biliary tract intraductal papillary mucinous neoplasm:report of 19 cases

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**Science editor:** Ya-Juan Ma

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input 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	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

Its a very interesting paper. Some corrections of english require a revision previous to publication . I recommend its publication Some correction was made but a deeper revision of english is recommend