



**ESPS PEER-REVIEW REPORT**

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

**ESPS manuscript NO:** 18877

**Title:** Pancreatic insulinomas laparoscopic management

**Reviewer’s code:** 00001832

**Reviewer’s country:** Germany

**Science editor:** Ya-Juan Ma

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

**COMMENTS TO AUTHORS**

The manuscript by Antonakis et al. reviews laparoscopic resection for pancreatic insulinomas. This is a well written up-to-date review describing various aspects of the management of pancreatic insulinomas with special emphasis on laparoscopy. As a general drawback: there have been (also recent) reviews of this topic: e.g. Mehrabi et al.: A systematic review of localization, surgical treatment options, and outcome of insulinoma; Su et al.: Is laparoscopic approach for pancreatic insulinomas safe? Results of a systematic review and meta-analysis. Thus, although in depth and comprehensive, the novelty of the presented summarized data and conclusions is limited. As another general remark: some of the statements should be toned down especially with respect to the lack of high quality (randomized controlled trial) data, e.g. zero mortality, 100% long-term cure, reducing hospital stay. A few typos need to be corrected: e.g. catecholamine.