

[Review Form2](#)

Book Name:	<a href="#">Achievements and Challenges of Medicine and Medical Science</a>
Manuscript Number:	<b>Ms_BPR_3623</b>
Title of the Manuscript:	<b>Choledochoplasty Using Serosal Surface of Stomach in a Case of Complete Destruction of Hepaticocholedochus Wall Following Necrotizing Pancreatitis</b>
Type of the Article	<b>Book chapter</b>

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**PART 1: Review Comments**

<b>Compulsory</b> REVISION comments	Reviewer's comment	Author's Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
<p><b>Please write a few sentences regarding the importance of this manuscript for the scientific community. Why do you like (or dislike) this manuscript? A minimum of 3-4 sentences may be required for this part.</b></p>	<p>Handling of complications such as necrosis of CBD following a severe acute pancreatitis depends on the extent of complications, technical and expertise, available resources and patient parameters. Serial patch repair was definitely a rescue procedure in this case report. The author has clearly highlighted how it has been of use in varied settings included in experiments in dogs.</p>	
<p><b>Is the title of the article suitable? (If not please suggest an alternative title)</b></p>	<p>It could mention, serosal surface of the stomach "and duodenum", instead of stomach alone.</p>	
<p><b>Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.</b></p>	<p>Yes. The "background" could emphasise on matters raised on abstract rather than on BDI following a cholecystectomy.</p>	
<p><b>Are subsections and structure of the manuscript appropriate?</b></p>	<p>Review of literature</p> <p>It could still come on the last of the chapter as is the norm. After the discussion on necrosis of CBD in necrotising pancreatitis, the discussion on how the Biliary epithelium grows as seen on experimental studies on dog could be mentioned (means combining half of the first paragraph to the third paragraph and then the third paragraph). The results by Dhal et al on HJ and serosal use in 1970s could be mentioned later. Are there any other literature on CBD necrosis following necrotising pancreatitis?</p> <p>Case report</p> <p>There could be more details on what constituted "severe" in severe necrotising pancreatitis. There could be more detail on the preoperative status of the patient. Were there any signs of sepsis despite usg showing cholangitic abscess? What was her nutritional status?</p> <p>The CT could be more concise mentioning only the relevant features. Was there a role for MRCP in presence of cholangitic abscess and prominent CBD?</p> <p>Operative procedure</p> <ol style="list-style-type: none"> <li>1. What was done for the cholecystoantral fistula?</li> <li>2. Where was the IFT placed?</li> <li>3. Was a subtotal cholecystectomy necessary after finding a necrosis CBD?</li> <li>4. How was the distal end of CBD dealt with?</li> <li>5. Was anything done for the peritoneal collection?</li> </ol> <p><b>Outcome</b> <b>P</b>ictures of cholangiogram</p>	

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<p><b>Please write a few sentences regarding the scientific correctness of this manuscript. Why do you think that this manuscript is scientifically robust and technically sound? A minimum of 3-4 sentences may be required for this part.</b></p>	<p>There could be discussion on</p> <ol style="list-style-type: none"> <li>1. Timing of cholecystectomy after gallstone pancreatitis</li> <li>2. Drainage of subhepatic collection preoperatively via a PCD</li> <li>3. Appropriateness of a cholecystectomy in presence of large collections in an asymptomatic patient with normal lab parameters versus prolongation of conservative approach</li> <li>4. Role of PTBD or ERCP in this case</li> <li>5. What were the other alternatives to choledochoplasty e.g. roux en HJ or serosal layer of the jejunum (which is less likely to be inflamed compared to the antrum) or simply placing subhepatic drains etc</li> <li>6. Benefit of serosal patch over others</li> <li>7. Need for prolonged Ryles tube placement?</li> <li>8. Plan on how to deal with the pancreatic collection/cyst</li> </ol>	
<p><b>Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.</b></p>	<p>References are very old.</p>	
<p><u>Minor</u> REVISION comments</p> <p><b>Is the language/English quality of the article suitable for scholarly communications?</b></p>	<p>Yes</p>	
<p><u>Optional/General</u> comments</p>	<p>This is an interesting book chapter. It highlights the importance of being resourceful and innovative in the setting of rare complications. However, comparison of the said procedure to other standard methods such as a hepaticojejunostomy or Drainage before a surgery would be interesting, at least in terms of theory if not in terms of actual data.</p>	

**PART 2:**

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
<p><b>Are there ethical issues in this manuscript?</b></p>	<p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p>	

**Reviewer Details:**

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