Reviewer’s report

Title: Yield of Endoscopic ultrasound in patients with moderate and high likelihood of suspected choledocholithiasis: a retrospective study from a single university based- endoscopic center

Version: 2
Date: 6 July 2014

Reviewer: Rabindra Watson

Reviewer’s report:

Major Compulsory Revisions

1. Line 137: This sentence implies that all patients underwent ERCP even if EUS did not detect stones. Is this the case? If so, this practice should be explained and justified. Did all patients who were high risk for CBD stones undergo ERCP?

2. Results: What percentage of patients presented with abnormal liver chemistries (other than bilirubin)? The level of elevation should also be reported as this has been shown to be a sensitive predictor of CBD stones.

3. Line 159: Why did these 4 patients undergo ERCP despite normal EUS? This should be explained.

4. Line 222: What is the data from this poster? This should be elaborated upon as this is the basis for the current investigation. Why are there 7 citations at the end of this sentence when only a single publication is discussed?

5. Line 224: Discordant with what? This needs to be clarified.

6. Line 229: Why are the investigators’ results different from the current literature? This should be explained or a hypothesis offered.

7. Line 243: This is not necessarily true in all parts of the world, and therefore the statement should be restricted to the authors' own situation.

8. Line 249: This sentence and the remainder of the paragraph simply restates the results. This should be removed and an interpretation of these results should be provided.

9. Line 256: It is established that alkaline phosphatase is synthesized by biliary epithelium in response to obstruction, therefore the phrase should be removed from parenthesis.

10. Line 232: This sentence overstates the study's findings. The authors state hypothesize that the low yield of EUS in their study is due to a longer time interval between presentation and endoscopy. Therefore it is inappropriate to conclude that ALL high risk patients should routinely undergo EUS prior to ERCP since most patients will be treated within 7 days in many practice settings.

11. A comparison of those patients who were evaluated within 7 days and > 7 days should be provided. If this is not feasible, then the mean time to presentation to should be presented for the study’s patients as this is critical to
the relevance of the proposed data and conclusions.

12. The limitations of this study should be presented in the discussion.

Minor Essential Revisions:
1. The following sentence’s grammar from the introduction should be changed to the present tense: . The incidence of choledocholithiasis in patients who have a gallstone, those who underwent previous cholecystectomy, and those with acute biliary pancreatitis was 10–20%, 7–14%, and 18–33%, respectively.
2. Line 94: ‘was lesser’ should be replaced by ‘is less’.
3. Line 120: This sentence should be removed and Figure 1 associated with the previous sentence.
4. Line 188: Citations for these percentages should be listed. Is this from data in the present study or cited from the literature? This should be clarified. If from the literature, the present tense should be used.
5. Discussion first paragraph: The present tense should be used when referring to the current medical literature.
6. Line 191: MRCP has less sensitivity as compared to what?
7. Line 224: The phrase ‘as mentioned above’ should be removed

Discretionary Revisions
1. Line 93: The phrase ‘a poster presented at DDW’ should be omitted, and the data simply stated.

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests