Reviewer’s report

Title: Appendiceal Duplication, A Rare Anatomical Anomaly: a case study

Version: 2 Date: 15 August 2011

Reviewer: Daithi Heffernan

Which of the following best describes what type of case report this is?: Unexpected or unusual presentations of a disease

Has the case been reported coherently?: Yes

Is the case report authentic?: Yes

Is the case report ethical?: Yes

Is there any missing information that you think must be added before publication?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: Yes

Does the case report have explanatory value?: Yes

Does the case report have diagnostic value?: Yes

Will the case report make a difference to clinical practice?: Yes

Is the anonymity of the patient protected?: Yes

Comments to authors:

Regarding Manuscript; “Appendiceal Duplication, a rare anatomical anomaly: a case report”

To whom it may concern

Overall this is a well written and interesting account of an unusual presentation occurring during a very frequently occurring clinical problem. I do, however have several questions and suggestions for the authors which would strengthen the manuscript.

In the abstract:
3rd sentence – add word “operative” – to read “We recommend aggressive [operative] management should this anatomical variation…..”
The portion entitled “conclusion” should be entitled “discussion” as this paragraph is not a conclusion. There should be a “conclusion” section following this which would be a one line sentence concluding their observations.

In the Introduction:
Last line, I disagree with the phrase “is not a surgical issue” as these findings often prompt surgical review and surgical consult. However, I believe that the authors are trying say that the mere presence of a duplicated appendix does not require operative intervention, and would suggest that the authors re-state the sentence as follows – “While the presence of appendiceal duplication in the absence of inflammation [does not require operative intervention], once there is…..”

In the Case Presentation:
Can the authors offer the working diagnosis on discharge of the patient?

In the Discussion:
The authors do a good job in describing the classification system, as well as a work up. However, the authors should write a section pertaining to management once the finding occurs, as this is a critical component in any case report. The authors make allusion to management in their abstract, but there is nothing in the discussion in the body of the manuscript describing management, either operative or non-operative.

The conclusion section is not the best location to mention management while it has not been mentioned in the body of the discussion. Could the authors discuss management in varying contexts such as incidental finding on CT scan, versus incidental finding during operation for other diseases, versus acutely inflamed appendix, versus duplication in the setting of inflammatory diseases such as Crohn’s disease.

Furthermore, in the introduction, the authors state that appendiceal duplication is associated with intestinal, bone and genitourinary abnormalities – could the authors expand on what the work up should be and how aggressive should be clinician be in undertaking a work up of these associations once a duplication is found.

Last sentence in the discussion – word “Leak” should be “Lead” [to confusion].

I appreciate the opportunity to review this submission. I think that this is a very interesting case report and hope that the authors can address the above mentioned concerns and questions.

**Quality of written English:** Acceptable

**Declaration of competing interests:**

I declare that I have no competing interests.