Author’s response to reviews

Title: Gallbladder polyps - a follow-up study after 11 years

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Author’s response to reviews:

Manuscript entitled: “Gallbladder polyps - a follow-up study after 11 years”.

Dear Editor,

Thank you for your feedback with the comments of the reviewers. We have summarized the points and notes in a point by point statement. Changes in the text have been highlighted with the track change mode.

We would be very pleased if this manuscript might be considered suitable for publication in BMC Gastroenterology.

Looking forward to hearing from you.

Sincerely,

Wolfgang Kratzer, MD,
Professor of Medicine/Gastroenterology
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Technical Comments:

1. Abbreviation - If abbreviations are used in the text they should be defined in the text at first use, and a list of abbreviations should be provided.

Answer: There a few abbreviations in the text. We inserted definitions and the list of abbreviations.

BMC Gastroenterology operates a policy of open peer review, which means that you will be able to see the names of the reviewers who provided the reports via the online peer review system. We encourage you to also view the reports there, via the action links on the left-hand side of the page, to see the names of the reviewers.

Answer: Thank you for the evidence.

Reviewer reports:

Thomas Jonathon Hugh, MD FRACS (Reviewer 1): This is an important study and a valuable contribution to the literature on this subject.

Answer: Thank you for this evaluation.

The authors note that the prevalence of GB polyps is higher than has been documented in the past (12.1% instead of 6%). They rightly indicate that this may not be due to a true increase in prevalence but rather improvements in ultrasound sensitivity.

The authors state that in the 2013 follow up study the prevalence of GB polyps was 12.1% (50/413 patients).
Then they went on to describe 27 patients who had already had polyps and they showed that 48.1% of these patients no longer had GB polyps. This is helpful information that can reassure patients who are found to have GB polyps but do not have any symptoms to warrant cholecystectomy that a follow up approach is justified.

Half of the patients who had polyps in 2002 and still had them in 2013 had an increase in the size of the polyps.

The other important information from this study is that 8.7% of patients who did not have GB polyps in the original study subsequently developed polyps. Predicting which patients might develop GB polyps, or which polyps might increase in size is not easy to do- do the authors have any comment on whether there were any clinical or morphological polyp features that might have identified those patients who developed polyps or those whose polyps increased in size or changed shape over time?

Answer: Unfortunately, this point was not analysed.

The authors did not comment on the exact size of the polyps that had grown over the 11 year follow up period and whether these patients subsequently underwent cholecystectomy. It would be helpful to know if any of the polyps that increased in size were subject to histopathological examination. Were they all simple cholesterol polyps or were there any GB adenomas in this group?

Answer: It is not known whether subjects underwent further examinations or cholecystectomy, there is no data about histopathological analysis.

Reviewer 2 (Reviewer 2): PEER REVIEWER COMMENTS: To view the full report from the academic peer reviewer, please see the attached file.

REVIEWER COMMENTS FROM REPORT: Brief summary of the findings presented in the manuscript

The authors of the present study aimed to analyze the prevalence and long-term progression of gallbladder polyps in the general population. The results show that the prevalence of gallbladder polyps increased in the population. Also, new lesions developed in 8.7% of the tested group. Polyps continue to persist in 51.9% of the individuals.
REQUESTED REVISIONS:

Background

The Background section is quite short, however, well-written and supported by the relevant references and clearly states the aim of the study.

Answer: Thank you.

Materials and Methods and Results

The Materials and Methods section is well-described. The method of statistical analysis is appropriate.

Answer: Thank you.

It would be beneficial for the paper to structure the Results section. This may include separating the text into small subsections with titles (for instance, one subsection describing the prevalence data and one subsection on the ultrasound scan characteristics.

Answer: Thank you for this advice. We inserted subtitles in the text.

The authors provided a comprehensive analysis of the prevalence of gallbladder polyps in a population sample. However, since the study aimed to investigate both the prevalence and long-term progression, it would be interesting to know if any of the patients originally included in the study underwent cholecystectomy and if any histological analysis of the polyps was performed.

Answer: It is not known whether subjects underwent further examinations or cholecystectomy, there is no data about histopathological analysis.

Also, since there several instrumental methods for the analysis of the polyps, has CT scanning ever been performed? CT scan is usually helpful in the analysis of tumorous polyps (Sun et al. Diagnosis and treatment of polypoid lesions of the gallbladder: Report of 194 cases. Hepatobiliary Pancreat Dis. 2004).

Answer: CT scanning has not been performed within our study. It is not known whether subjects underwent CT scanning in the course.
Discussion and Conclusion

Although, as the Conclusion states the current study has been completed in 2013, there are several relevant papers, which were published after 2013 and may be included in the current manuscript as references.

With regard to current guidelines and management of gallbladder polyps, the authors would be recommended to include the recently published joint guidelines from several European medical societies (Wiles et al. Management and follow-up of gallbladder polyps: Joint guidelines between the European Society of Gastrointestinal and Abdominal Radiology (ESGAR), European Association for Endoscopic Surgery and other Interventional Techniques (EAES), International Society of Digestive Surgery - European Federation (EFISDS) and European Society of Gastrointestinal Endoscopy (ESGE) (Eur Radiol 2017).

Answer: That is an important guideline. We inserted it in our text.

In addition, a comprehensive paper reviewing a large number of publications focusing on progression of gallbladder polyps has recently been published and may also be included as a reference (Babu et al. Management and diagnosis of gallbladder polyps: a systematic review. Langenbecks Arch Surg. 2015).

Answer: Thank you. We included this paper.

Also, there are several other publications on the prevalence of gallbladder polyps in general population, such as: Choi et al. Prevalence and Risk Factors of Gallbladder Polypoid Lesions in a Healthy Population. Yonsei Med J. 2016.

Answer: Also this publication is included now in our text in the part about data collected during healthcare screening.

References

Although the authors have provided an extensive list of relevant references, it would be beneficial for the paper to include more recent publications mentioned above.

Answer: Thank you, we included the suggested references.

Overall conclusion
The current study follows the appropriate ethical and scientific standards. While completed in 2013, the study is still relevant and provides valuable data for the research on gallbladder polyps. The presented data will be interesting for both gastroenterologists and laboratory researchers. The manuscript would benefit from addition of several recent references relevant to this medical field. The manuscript may be published in a relevant gastroenterology or other relevant clinical journal with a moderate impact factor.

Answer: Thank you for this evaluation. We would be very pleased if the manuscript would be published.