Reviewer’s report

Title: A CASE OF MALIGNANT INSULINOMA RESPONSIVE TO SOMATOSTATIN ANALOGS TREATMENT

Version: 1 Date: 16 Aug 2018

Reviewer: Labrini Papanastasiou

Reviewer's report:

Comments to the Authors

Several points should be addressed:

In this case report, the authors described a patient who was presented to their hospital with post-exercise and fasting hypoglycaemia. After a biochemical and imaging work-up the patient was diagnosed with insulinoma and preoperatively short-acting octreotide was administrated for 1 month to prevent hypoglycaemia. However, similar cases treated with somatostatin analogues (SSAs) were previously presented.

1. In the background section, the authors should clearly explain why the case is important to be reported.

2. In the first three paragraphs of the discussion section, the authors described in general the Wipple' triad and the causes of hypoglycaemia. In the 4th and 5th paragraph they referred to the diagnosis of insulinomas with biochemical and imaging procedures and only in the last paragraph they commented on the pharmacological treatment that is the most important issue of this case report. Moreover, they did not summarise the available literature concerning SSAs treatment in patients with hypoglycaemia related to endogenous hyperinsulinaemia (eg benign, malignant insulinoma). The information given in the discussion section should be focused and linked to the particular case, providing the current evidence on the SSAs treatment in patients with insulinomas and highlighting the contribution of their findings to the current scientific knowledge.

3. In the background section, the authors should give a reference in support of their statement 'the dimension>4cm…indicators of malignancy.'

4. Did the authors use only short acting octreotide or did they replace it with long-acting one?
5. In the case presentation section, the authors reported 'The patient's laboratory results showed endogenous hyperinsulinemia compatible with insulinoma'. It is known that the diagnosis of insulinoma is confirmed not only by laboratory investigation but also by imaging localizing examination. Thus, the authors should modify their sentence.

6. The reference range of the various hormonal parameters (ie insulin, c-peptide) should be added in the manuscript.

7. The word 'insulinemia' should be replaced with 'insulin levels' throughout the text and tables as appropriate.

8. 'The test showed an increase in plasma glucose above 100mg/dl…' a reference regarding the test should be provided.

9. A figure showing the described pancreatic histological findings that confirmed the diagnosis should also be provided.

10. Table 2 is not necessary. The glucose levels after the glucagon test should be added in the text.

11. The authors should use arrows to indicate imaging findings in order to highlight them to the reader in the figures.

12. In table 1 what 'h24' stands for? Please explain.

13. 'Abdominal CT scan with contrast…..without signs of infiltration'. Please rephrase to become better understandable the phrase.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Unable to assess

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Unable to assess

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No
Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

Quality of written English
Please indicate the quality of language in the manuscript:

Acceptable

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