Author's response to reviews

Title: "There was a young man, who swallowed a coin..." Pancreatic and biliary obstruction years after a swallowed foreign body retained in a duodenal diverticulum: A case report

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Reviewer 1
- I have included a statement to say the coin may have been an innocent bystander and has nothing to do with the duodenal stenosis. It certainly helped us to progress with further investigation and cliché the diagnosis quickly. I have included further images of CT scans depicting the coin and dilatation of the bile duct. The stenosis was not visualised due to the artifacts from the coin.
- According to the patient's mother, she has confirmed that she is not a coin collector and no old coins were accessible at the house the patient was staying.
- Patient had regular follow up at the transplant clinic and there were no concerns relating to any abdominal symptoms to suggest any gastric outlet obstruction.

Reviewer 2
- The transplant surgeon who performed the endoscopy was of the opinion that the stenosis was from a congenital duodenal diverticulum and not a stenosis leading to a secondary diverticulum. These again were confirmed during the surgery later on.
- Unfortunately, only two images were saved from the original endoscopy and I do not have a better visualisation of the diverticulum and stenosis than the one that I have included with the manuscript.
- I have removed reference to cholangitis as blood tests did not show a raised bilirubin – but patient had high-grade fever and certainly given deranged liver enzymes antibiotics were commenced due to concerns for ascending cholangitis.
- Diverticulum has been changed to diverticula as the pleural form.
- I have elaborated on the more sinister pathology we were considering – i.e. malignancy of head of pancreas as there was no stones to account for dilated biliary tree.
- I have also carefully revised paying attention to the grammar and style required by your journal.