Reviewer's report

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

Version: 4 Date: 2 December 2014

Reviewer: Tom Moreels

Which of the following following best describes what type of case report this is?: An unexpected event in the course of observing or treating a patient

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:

The authors present an interesting, but rather anecdotal case report on a coin entrapped within a duodenal diverticulum with subsequent cholangitis/pancreatitis. There are several comments to be addressed:

1. Although it is suggested that this coin may have caused duodenal stenosis and cholangitis, it is not confirmed. The authors should make a statement upon this uncertainty. Additional radiological and/or surgical pictures showing the relation between the coin and the dilated common bile duct and the duodenal stenosis should be provided.

2. As suggested by the authors, the coin was expected to be present for more than 10 years. It is difficult to understand how the coin could remain unnoticed so
long in a patient supposed to be in regular follow-up after kidney transplantation. The fact that the coin dated from 1975 and was taken out of circulation in 1994 does not mean that is was swallowed in 1994. Many people may want to collect old coins.

3. Did the patient experience symptoms related to duodenal stenosis (gastric outlet syndrome ?). The relation with the presence of a small coin entrapped within the large duodenal divertulum (Figure 2) and duodenal stenosis remains unclear.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Declaration of competing interests:**

I declare that I have no competing interests