Rebuttal

Thank you for reviewing the manuscript and for your valuable feedback.

Kindly find the point-by-point response to each of the issues raised by the Editorial office. Also, as suggested, the revised/added content in the revised manuscript has been heighted in yellow.

(1) Science Editor

1. Conflict of interest statement: No conflict of interest
   Thank You.

2. Manuscript’s theme: The topic is within the scope of the journal
   Thank you for your review.

3. Academic misconduct: No academic misconduct was found.
   Thank you.

4. Scientific quality: The authors submitted a manuscript discussing the silent gallstone code. The manuscript is overall qualified.
   Thank you for your valuable comments.

5. Advantages and disadvantages: The reviewer has given positive peer-review reports for the manuscript. Scientific Classification: Grade A and Grade D; Language Quality: two Grades A. This up-to-date paper regarding the prevalence and management of gallstone disease, highlighting its widespread occurrence and predominantly asymptomatic nature. It underscores the increasing rate of cholecystectomies, fueled by advancements like laparoscopic techniques, and discusses the implications of widespread ultrasound use in unearthing silent gallstones.

   Thank you for your encouraging words.
6. **Table(s) and figure(s):** There is 1 table, and it should be improved.

Thank you. The table 1 has been split into two tables for the convenience and has been revised according to the journal specifications.

7. **References:** A total of 33 references are cited, including no references published in the last 3 years. There are no self-cited references of the authors. The cited references are overall sufficient and reasonable. The reviewer didn’t request the authors to cite improper references published by him/herself.

Thank you. There has been a minor oversight. References number 12 and 28 were similar, therefore, reference 28 has been removed. Other succeeding references have been corrected accordingly in the main manuscript as well as in the reference section.

Also to highlight the recent advances, three new references have been added (reference no. 28, 29, 35). Finally, 35 references are included in the revised manuscript.

8. **Language evaluation:** The English-language grammatical presentation needs to be improved to a certain extent.

The manuscript was revised for the grammatical error.

9. **Medical ethics:** Please provide the filled conflict-of-interest disclosure form.

Thank you. The Conflict-of-Interest Disclosure form has been filled and attached.

10. **Specific comments:**

(1) The “Author Contributions” section is missing. Please provide the author contributions.
Thank you. Author contributions have been added.

(2) Authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content.

The table has been modified according to the journal specifications and attached in the revised manuscript.

(3) Please provide the PubMed numbers (https://pubmed.ncbi.nlm.nih.gov/) and DOI citation numbers (https://doi.crossref.org/simpleTextQuery) to the reference list and list all authors of the references. If a reference has no PMID and DOI, please provide the source website address of this reference.

Thank you. The references have been corrected as advised.

(2) Company Editor-in-Chief:

I have reviewed the Peer-Review Report, full text of the manuscript, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office’s comments and the Criteria for Manuscript Revision by Authors.

Thank you. The manuscript has been revised according to the Editor’s comments and journal’s specifications. To improve the manuscript, references from the latest research has been added and highlighted (reference no. 28,29,35) as suggested.

Reviewer#1:
Congratulations for this up-to-date paper regarding the prevalence and management of gallstone disease, highlighting its widespread occurrence and predominantly asymptomatic nature. It underscores the increasing rate of cholecystectomies, fueled by advancements like laparoscopic techniques, and discusses the implications of widespread ultrasound use in unearthing silent gallstones. This is my report regarding the submitted paper: 1. Title. - The title does not reflect properly the content of the manuscript and the type of research: please state this is an descriptive review 2. Abstract. - It is not structured; missing important information regarding the scope of the article, the type, and analyzed data. Please rephrase. 3. Key Words. Well chosen. 4. Introduction. This section is missing; please insert the proper title in LINE 42. 5. Material and methods. - This section is also missing. If the authors decide to give this paper the direction of a descriptive review, please state how you selected the articles for reviewing: time span, databases, language restrictions (if any). - If the author’s intention was to present a descriptive review, then insert this section starting with LINE 58. 6. Results. - This section is missing. Please state here how many papers have been selected, etc. Also, please define the level of confidence for each criterion discussed further in the paper. 7. Discussion. - This section is missing, please construct one using the current subchapter labels (What is asymptomatic gallstone, The origin of the debate, etc.) but nest them under Discussions. - The number of citations for this section is adequate and so is the timespan. 8. Conclusions - The conclusions stated fully support the data presented in the manuscript. 9. Illustrations and tables. - The provided table is well designed and provides a sufficient level of clarity. 10. Biostatistics. n/a 11. Units. n/a. 12. References. - The list of 33 references is small (for a descriptive review) and does not meet the minimum requirement of at least 50 publications. - The timespan is also not adequate. The analysis reveals that most of the sources cited are before 2000: 1980s: 10 publications (1983, 1983, 1984, 1982, 1989, 1987, 1984, 1983, 1989, 1987) 1990s: 10 publications (1998, 1994, 1995, 1993, 1998, 1995, 1993, 1998, 1996, 1993) 2000s: 4 publications (2007, 2007, 2000, 2004) 2010s: 3 publications (2015, 2010, 2010) - The authors should update the reference list and include more modern research, such as (but not limited to): Association with menopausal hormone therapy and asymptomatic gallstones in US women in the third National Health and Nutrition Examination Study. Jackson SS, Graubard BI, Gabbi C, Koshtoil J.Sci Rep. 2024 Jan 2;14(1):191. doi: 10.1038/s41598-023-50509-2.PMID: 385168135 Prevalence of Silent Gallstones on Ultrasound in a Nigerian Population. Ogunleye OA, Akinmoladun JA, Oluwaniyi J, Ogunbe J, Kowe F, Adefuye M.West Afr J Med. 2023 Jul 28;40(7):748-752.PMID: 37516927 ASYMPTOMATIC CHOLELITHIASIS: EXPECTANT OR CHOLECYSTECTOMY. A SYSTEMATIC REVIEW. Alves JR, Klock DM, Ronzani FG, Santos SLD, Amico EC.Arq Bras Cir Dig. 2023 Jul 17;36:e1747. doi: 10.1590/0102-672020230029e1747. eCollection 2023.PMID: 37466567 Cost-effective Decisions in Managing Silent Common Bile Duct Stones Should Include All the Management Options to Help Decision Makers. Date A, Date RS.Ann Surg. 2017 Dec;266(6):e89-e90. doi: 10.1097/SLA.0000000000001714.PMID: 29137002 Natural history of asymptomatic gallstones: differential behaviour in male and female subjects. Sood S, Winn T, Ibrahim S, Gobindram A, Arumugam AA, Razali NC, Yasmin P, Hidayu N, Sani H, Mustafa MH, Fatinah A, Devi A, Karim AA, Obaid

13. Quality of manuscript organization and presentation. In its current form the article is not fit for publication. 14. Backmatter section. - This section is missing; please state each author’s contribution, according to CRediT taxonomy. 15. Ethics statements. - Missing. Please provide an ethics committee approval document for this study. 16. English language: The quality of English language is consistently good throughout the entire text. No need for revision. CONCLUSION OF THE REVIEW REPORT The manuscript requires major changes before being considered for publication.

Thank you for your valuable comments. As suggested, research highlighting recent advances have been referenced (reference no. 28, 29, 35) and highlighted in the manuscript. However, since it is not the descriptive review article, but an Editorial, all the other changes have not been accepted. The manuscript has been revised according to the Editorial comments as suggested in the correspondence mail by the Editorial office. We are however grateful to the Reviewer for his inestimable advice and comments.

Reviewer #2: Good work.

Thank you for your encouraging comments.