Author's response to reviews

Title: Mucosal atrophy in collagenous colitis: A case report

Authors:

Michael Majores (mmajores@uni-bonn.de)
Steffen Wunsch (familie-wunsch@web.de)
Bernd Blume (dr.b.blume@t-online.de)
Hans-Peter Fischer (hans-peter.fischer@ukb-uni-bonn.de)
Christoph Reichel (christoph.reichel@web.de)

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Manuscript: Mucosal atrophy in collagenous colitis: A case report (MS: 1505213811489790)

Dear Mr. Shipley,

Please find enclosed the re-revised version of our manuscript entitled „Mucosal atrophy in collagenous colitis: A case report.” in which all of the reviewers’ suggestions have been addressed. A detailed list of changes is enclosed.

We hope that the re-revised manuscript meets your and the referees’ expectations and is now suitable for publication. In addition, we want to express our gratitude to the reviewers for their fair and very constructive suggestions, which improved the quality of our manuscript considerably.

Thank you very much for your time and consideration.

Sincerely yours

Christoph Reichel

Point-to-point consideration of the reviewers’ suggestions:

Editorial board members’ comments:

Comment

"I believe that this manuscript could be considered scientifically sound, although endoscopic photo taken in 1998 is of poor quality. I think it shows no apparent atrophy of the cecum in 1998. “
Rebuttal

As expected, we improved the quality of the 1998 insert in Figure 1A by optimizing the digital reproducing of the 1998 instant camera image. We believe that this results in an improved resolution facilitating the meaningful comparing of the 1998 instant camera image with the 2008 high quality digital image. Overall, the new 1998 insert in figure 1A supports ours’ and the editorial board members’ assumption of no atrophy in the 1998 cecum. The limitations of comparing images of different qualities are addressed in the Discussion of our actual manuscript.

Comment

The authors described segmental mucosal atrophy involving the ascending and transverse colon at the first sentence in Discussion. So, the only part which confused me is that mucosal thickness of transverse colon in 2008 seems to be almost within normal as shown at the top of Figure 2.”

Rebuttal

We changed the first sentence in our Discussion accordingly.