Reviewer's report

Title: Association of genetic polymorphisms in the interleukin-10 promoter with risk of prostate cancer in Chinese

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Reviewer: Rama Mittal

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There are lot of points to be addressed and clarified by the authors in the present manuscript

Procedure for identification of patients and controls should be given in detail.
1.rs no for all the three polymorphism should be mentioned.
2.In logistic regression analysis adjusted ORs for confounding factors like age, smoking etc. should be done.
3.In the methodology part, version of SHE sis software’s version and country of origin should be given. Moreover, description of statistical approach used in the haplotyping software should be given briefly.
4.What was average PSA in patients and controls? The authors have not specified the cut-off value for S.PSA level for the patients in their population, as they have also included patients having PSA levels less than 10ng/ml.
5.The authors have made a major mistake in analyzing the results, 1st para, last 2 lines they have written that in their study they found higher percentage of patients with advanced stage than early stage cases (73% vs. 27%), whereas the table 1 showing demographic details reflect just opposite results with higher % of patients with early stage than advanced stage.
6.In the materials and method section the authors define advanced prostate cancer cases as having either a Gleason score >7 or tumor-node-metastasis stage >T2. Hence they should also specify that did they calculated the no. of patients with aggressive status i.e. early or advanced because as written on combining the patients with gleason score >7 and TNM stage >T2 does not add upto the no. of 71 for advanced stage cases? ? ? ? ? ?
7.Next in table 4 which depicts the association of IL-10 haplotypes with Aggressive status the no. of patients with advanced stage has become 180 whereas that for the early stage is 72......... Again changed from what is in the earlier results??
8.In discussion section a comparison of present results with other reports should be given which will provide a better understanding of the pathogenesis of the results.
9.As the results suggest the role of IL-10 -1082 in PCa metastasis and progression, it will be better if authors can provide a Kaplan Meier curve for time to HRPC associating it with IL-10 -1082 polymorphism.
10. The conclusions are inconclusive due to wrong projection of results in terms of tumor grade and metastasis state and mixing up of numbers between early and advanced stage tumor numbers

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests: No conflict of Interest