Author’s response to reviews

Title: Outcome of patients with advanced solitary fibrous tumors: the Centre Leon Berard experience.

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Author’s response to reviews: see over
Dear Editor,

Please find attached a revised version of our manuscript entitled “Outcome of patients with advanced solitary fibrous tumors: the Centre Leon Berard experience.”

First of all, we would like to thank both reviewers for their useful comments in improving our manuscript. We have corrected the numerous typographical and grammatical errors noted in the previous version of the manuscript in the abstract, text and figures. Also the beginning of section 2 (first line treatment) was reorganized to improve readability as per both of the reviewers comments.

As per Prof Bertucci’s comments we have added the number and percentages of patients free from progression at 6 months after chemotherapy both in the text and abstract. We have also added the statistical tests, algorithms and threshold for statistical significance used in our study in the “patients and method” section. In the result section the time when the seventeen patients developed metastases was added.

As per Dr Montemurro’s comments we changed table 2 to provide a more detailed description of individual patient outcome following first line chemotherapy. Regarding the comment for patients receiving anti-angiogenic the total number is 10 patients (and not 11 as previously stated) (6 on pazopanib and 4 on sunitinib) as indicated in the corrected “response to antiangiogenic treatment” section. One patient though to have received an sunitinib actually received an mTOR inhibitor. The “response to anti-angiogenic treatment” section was modified accordingly, notably this did not affect the median PFS although the 95%CI was modified. As the “other line of therapy” section only describes treatments up to 3rd line, two patients receiving 4th line sunitinib were not described. This section has been amended to include 4th line and further lines of treatments.

We did not combine figures 2A and 2B with figure 3 because we felt this would not make sense from the scientific point as most of the patients who received anti-angiogenic agents (depicted in figure 3) received first line chemotherapy.

Finally several modifications were made to comply with BMC Cancer’s editorial policy. These modifications include, an added sentence in the “patients and method” section to reflect the fact that this study was approved by the local ethics committee (CPP Lyon Est IV), as well as the addition of “competing interest” and “author’s contribution” sections.

We feel that these modifications have improved the quality of our manuscript and hope they will give satisfaction to both reviewers as well as to the Editor.

Best regards.

Philippe CASSIER, MD.