Reviewer's report

Title: Surgery of highly eloquent gliomas primarily assessed as non-resectable: risks and benefits in a cohort study

Version: 1 Date: 14 October 2012

Reviewer: Hugues Duffau

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Major revisions

The authors report a series of 47 gliomas which were initially considered as inoperable in another institution, due to their location in eloquent areas. Thanks to the use of intrasurgical mapping and monitoring techniques, gross total resection was finally achieved in 74% of cases, with 8.5% of permanent neurological worsening.

This is an interesting article. The rationale of this study is original. The results are well presented and well discussed. These data support the fact that neurosurgeons should be careful before to tell that a tumor cannot be removed. Thus, this paper may be useful for the neuro-oncological community.

However, the recent article by Chang EF et al., J Neurosurg 2011 should be cited and discussed, because it previously showed that the use of intrasurgical mapping allowed the resection of gliomas which involved areas wrongly considered as being crucial - and resulted in an improvement of overall survival.

In addition, the authors cannot write that "The nTMS data regarding language mapping offered valuable information for the surgeon in advising our patients and planning the surgery" (page 15). Indeed, there are no data in this article demonstrating such an assertion.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests: No any competing interests