Author's response to reviews

Title: Immunosuppressive Glycodelin A is an independent marker for poor prognosis in endometrial cancer

Authors:

Miriam Lenhard (miriam.lenhard@med.uni-muenchen.de)
Sabine Heublein (sabine.heublein@med.uni-muenchen.de)
Christiane Kunert-Keil (keil@uni-greifswald.de)
Thomas Vrekoussis (thomas.vrekoussis@med.uni-muenchen.de)
Isabel Lomba (isa@lomba.de)
Nina Ditsch (nina.ditsch@med.uni-muenchen.de)
Doris Mayr (doris.mayr@med.uni-muenchen.de)
Klaus Friese (klaus.friese@med.uni-muenchen.de)
Udo Jeschke (udo.jeschke@med.uni-muenchen.de)

Version: 3 Date: 7 November 2013

Author's response to reviews:

Dear Editors-in-Chief, Dear Editorial Board Members,

Thank you very much for your positive response regarding our manuscript entitled “Immunosuppressive Glycodelin A is an independent marker for poor prognosis in endometrial cancer”.

We have now re-formatted our manuscript according to the recommendations outlined in REMARK "Reporting Recommendations for Tumor Marker Prognostic Studies" (J Clin Oncol 23:9067, 2005). A Summary of changes made is provided below.

Please do not hesitate to contact me in case of any questions regarding the manuscript.

Sincerely yours

Miriam Lenhard, MD

Changes made according to the REMARK criteria

1. Article outline

The article outline has been modified as recommended in "Reporting Recommendations for Tumor Marker Prognostic Studies" (J Clin Oncol 23:9067, 2005).

2. The following passages have been added:

Materials and Methods - Patients:
"Formalin fixed paraffin embedded (FFPE)"

Materials and Methods - Study design:
"Tissue samples of endometrial cancer tissue gained at surgery at the Department of Obstetrics and Gynaecology of the Ludwig-Maximilians University Munich between 1990 and 2001 were randomly retrieved from the archive. FFPE material was stained for Gd, GdA or under-went ISH for Gd mRNA; matching clinical data were analysed retrospectively."

Results:
"Endometrial cancer tissue of 292 patients (Table 1) was available. Data of 291 cases analysed for Gd, 289 cases stained for GdA and 254 cases analysed for Gd mRNA were included in the statistical analysis. Remaining cases (IHC: Gd: n = 1, GdA: n = 3 and ISH: Gd mRNA: n = 38) had to be excluded due to technical reasons. [...] and further patient characteristics are listed in Table 1."