Author's response to reviews

Title: Incidence and Outcome for Patients with Occult Lymph Node Involvement in T1 and T2 Oral Squamous Cell Carcinoma: A prospective study

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Submission:
“Incidence and Outcome for Patients with Occult Lymph Node Involvement in T1 and T2 Oral Squamous Cell Carcinoma: A prospective study”

Dear Professor Solera,
Dear associate Editors,

please find enclosed our prospective study entitled “Incidence and Outcome for Patients with Occult Lymph Node Involvement in T1 and T2 Oral Squamous Cell Carcinoma: A prospective study“, for consideration as an article for the Journal BMC Cancer.

The evidence base to inform the decision making process in patients with early stage oral cancer and a clinical and radiological N0 neck remains insufficient to answer the question when it is safe to “watch and wait” and when to proceed with a selective neck dissection. The purpose of the presented study was to investigate the oncologic results and role of primary surgical treatment for clinically early-stage squamous cell carcinoma. The incidence of
lymph node involvement and its role in overall survival was further investigated.

In this clinical prospective study we analysed a total of 327 consecutive cases of histopathologically staged T\textsubscript{1-2}, N\textsubscript{0-1} and M\textsubscript{0}, but clinically N\textsubscript{0}, squamous cell carcinoma of the tongue. In 61 patients (18.65\%) lymph node involvement was found in the histopathological processing. The mean survival of all patients was 73.3±48.6 months. The 2-year and 5-year overall survival rates of all patients were 87.5\% and 68.4\%, respectively. Furthermore, we determined the specific 2-year and 5-year survival rates for stage N\textsubscript{0}, N\textsubscript{1}, T\textsubscript{1} and T\textsubscript{2} cases. Our results confirmed a high overall disease free survival for patients with T\textsubscript{1} and N\textsubscript{0} treated with single modality surgery and in common with the literature confirms the poor impact on prognosis of the N positive neck.

This work has not been submitted to the Journal BMC Cancer or published elsewhere and is not submitted to another journal. All co-authors have agreed to the submission of the final manuscript.

We included acknowledgements after author´s contribution and also included an ethics statement in the methods section of the submitted manuscript, according to the email regarding revisions required prior to initial assessment (MS: 1546793206117902).
We look forward to hearing from you and would be delighted if the manuscript was to be considered for publication in your journal. If you have any questions please do not hesitate to contact us. We believe that this topic is of interest and importance for the broad readership of the Journal of BMC Cancer, containing a high level of evidence and the correct readership of an open access Journal with a high level of scientific work.

Kind regards

[Signature]

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