Author's response to reviews

Title: Case Report: Anti-hormonal Therapy in the Treatment of Ductal Carcinoma of the Parotid Gland.

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Author's response to revisions

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Case report
“Anti-hormonal Therapy in the Treatment of Ductal Carcinoma of the Parotid Gland”

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First of all, I would like to take the time to thank you for revising our manuscript. We have read your comments and we would like to outline the changes made below:

1. Reviewer 1: Peter Dziegielewski
   a. Abstract:
      i. The case presentation is somewhat confusing. The description of the initial presentation does not mention the parotid lesions. This should be revised to make it clear that the patient presented with scalp and parotid lesions.
         1. In the abstract, the presence of parotid lesions and metastatic scalp lesions were clarified from the initial presentation.
   b. Background:
      i. The last 1-2 sentences of the background should state the aim / goals of the paper.
         1. The aim of the case report is stated in the last sentence of the Background.
      ii. The majority of papers cited in the background are 10+ years old. There is a slowly growing body of literature on salivary duct carcinoma, gene expression and targeted therapy. There are several papers from 2010-2014 that should be included.
         1. We reviewed the literature and added more recent reports of genetic profiling and targeted therapy in salivary ductal carcinoma.
   c. Case Presentation:
i. You state that the patient refused surgical treatment, but then later she underwent surgery. This should be clarified.

1. **This has been clarified in the case presentation (lines.**

ii. Was there any imaging done post-treatment? If so, it may be worthwhile to include a pre- and post-treatment scans in the figure.

1. **An image with pre , post treatment and postsurgical Tomography is included on figure 1.**

d. **Conclusion:**

i. The idea of using targeted therapy for salivary ductal carcinoma via hormone receptor blockers is not novel. However, the use of Tamoxifen is. This paper is important in that it highlights an additional therapy for this rare disease.

1. **We have added the novelty of Tamoxifen as a therapy in this particular disease in the conclusion, clarifying the importance of our case presentation.**

ii. Given that salivary ductal carcinoma is rare and that treatment options are limited, a review of treatment options including hormone receptor blockers such as trastuzumab, anastrazole etc. would be useful to include on the discussion. There are several newer papers from 2013 and 2014 that would be useful to include. There are some recent basic science papers as well that suggest targeting ER in select patients could be useful. Including this evidence would strengthen the paper.

1. **We reviewed and added more recent reports of genetic profiling and target therapy on salivary ductal carcinoma.**

2. **Reviewer 2: Shigenori Kadowaki**

a. There are quite some odd wordings and use of grammar. The manuscript would be improved by a thorough English language review before acceptance for publication.

i. **A native English speaker has revised and edited the text.**

b. The following images should be presented: computed tomography images that show evident tumor reduction or stable disease after treatment with tamoxifen and anastrozole; pathological image of estrogen receptor immunostaining before treatment with tamoxifen.

i. **An image with pre, post treatment and postsurgical Tomography is included on figure 1.**

ii. **Haematoxylin-eosin staining, Her2, Estrogen and Progesterone receptor immunostains are described on case presentation and images included on figure 2 (page 4).**
c. The methodology to detect immunoreactivity for sex hormone receptors (antibodies, etc) should be presented.
   i. Haematoxylin-eosin staining, Her2, Estrogen and Progesterone receptor immunostains and methodologies are described on case presentation and images included on figure 2 (page 4)

d. The references regarding sex hormone receptor overexpression in salivary duct carcinomas should be presented and discussed in the manuscript.
   i. We have referenced the sex hormone receptor overexpression in SDC and discussed them in our manuscript.

Again, thank you for your interest in our work. We hope to hear from the reviewers soon. Please do not hesitate to contact us with any questions you may have.

Best Regards,

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