Author's response to reviews

Title: Prevalence and types of thyroid malignancies among thyroid enlarged patients in Gondar, Northwest Ethiopia: a three years institution based retrospective study

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Author's response to reviews: see over
**Author’s response to** Anjali Mishra

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**Author’s response to the reviewer**

**Major Compulsory Revisions**

. We didn’t incorporate all things that were raised in the response because of our thought that making all things incorporate to the manuscript is irrelevant. However, as you told us losing the relevant information is a big mistake. Considering this we addressed the

1. The authors have responded that no particular system of classifying FNAC results was used, ………………………
   Thank you for your excellent comments and we accepted it and the same change have been made to the manuscript
   For the current study, FNAC results were categorized under 4 groups.
   1. **Malignant** when FNAC result were reported as papillary thyroid carcinoma (PTC), medullary thyroid carcinoma (MTC), undifferentiated carcinoma, lymphoma or metastatic tumor. This were primarily done by pathologists when they saw clear features of papillary, medullary or anaplastic carcinoma, lymphoma or metastatic tumor
   2. **Neoplasm lesion** if the FNAC reports were neoplasm or suggestive for neoplasm.
   3. **benign (non-neoplastic)** if FNAC result were reported as colloid goiter, thyroid cyst and thyroiditis. And this is also formerly made by pathologist when they saw features consisting of colloid nodule, thyroid cyst and thyroiditis
4. **Inconclusive FNAC result** if it was reported as non diagnostic or suggestive for malignancy.

   **Non diagnostic:** When there was inadequate cellularity for diagnosis or bloody sample

   **Suggestive for malignancy:** if there was evidence that was suggestive to malignancy (PTC, MTC, undifferentiated carcinoma, lymphoma or metastasis) but not enough to conclude as malignant.

2. Similarly records regarding thyroid function and TNM categorization were not available.

   Thank you for your comment. But, we didn’t accept your comment. As to our understanding is concerned documenting about unavailability of TNM categorization and thyroid function in methodology section is not relevant rather the authors have incorporated the idea in the last paragraph of the discussion part as limitation of the study

**Minor Essential Revisions:**

We appreciated your comment and it is accepted as per your comment. Similar changes have been made to the manuscript.