Reviewer's report

Title: The Role of Major Duct Excision in the Detection of Breast Carcinoma.

Version: 2 Date: 12 April 2006

Reviewer: Jun Horiguchi

Reviewer's report:

General
Treatment of patients with nipple discharge has been reserved for patients who presented with unilateral, single and occult blood-positive discharge. In this paper, major duct excision for nipple discharge resulted in a low rate of malignancy, and no malignancy in patients with non-bloody nipple discharge.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
1. Number of patients who received nipple smear cytology (n=24) is too small to evaluate relationship between smear cytology and pathological findings on excision.
2. Clarify definition of pathological nipple discharge
3. Revise tables 1, 2 and 3
   Spell out. Abbreviation: HRT/OCP in table 1
Evaluate patients factors by malignant or non-malignant histology and by non-malignant pathological discharge or non-malignant non-pathological discharge separately.
Table 2: Nature of discharge should be classified by pathological discharge or non-pathological discharge.
Table 3: Describe pathological findings on excision in patients with bloody discharge or non.

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
Abstract and results: Add both number of patients and %.
   cf: four patients (44%)
Revise several minor typographical errors.
   Grammatical error, line 4-5 in page 8, etc

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Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

Statistical review: No

Declaration of competing interests:
I declare that I have no competing interest.