Author's response to reviews

Title: Disease characteristics and treatment of women with early onset breast cancer participating in the Prospective study of Outcomes in Sporadic versus Hereditary breast cancer (POSH)

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Author's response to reviews: see over
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The BioMed Central Editorial Team
BMC Cancer Journal.

Dear Editors,

Re: 3768556471383264 Resubmission 5 Disease characteristics and treatment of women with early onset breast cancer participating in the Prospective study of Outcomes in Sporadic versus Hereditary breast cancer (POSH)

In response to reviewers’ and editor’s comments we have made the following changes to our previously submitted manuscript.

The paper has been rewritten to present the study protocol without any of the preliminary outcome data.

2. Referee 2 was interested to see power calculations – these are now included in the protocol and in the abstract. We felt it was appropriate to include a very brief summary from preliminary BRCA1/2 mutation analysis under the power calculation section to illustrate that the study will indeed have good power to answer the primary study aims and to justify the study recruitment target.

3. Referee 1 felt the aims were not sufficiently clear but also points out the great potential of this study for multiple secondary end points. In addition it provides great opportunities for the study specifically of the biology of breast cancer in young patients. The latter potential for the study is too broad to cover in a study protocol but is well recognised by the authors and steering group. For the purposes of presenting the study protocol however, it was felt most appropriate to confine the aims to the original primary aims of the study and to include the already enacted sub-studies as secondary aims with a link to the study website for further information. We have also included a statement that indicates the mechanism to access the resource where good proposals for other studies are put forward by potential new collaborators. DME and PDS are the PI and co-investigator and this is now clarified in the text.

We have changed the term “pathogenic” to “protein truncating” for the description of mutation type (pathogenic was used to differentiate the mutations that will cause clear disruption to the normal protein and therefore cause a high risk for breast cancer from the mutations of uncertain significance found in 20% or so of any group tested). The mutation analysis data have been presented at meetings recently but are not formally published.

We have included the data collection forms as figures as noted in point 1 in response to referee 1’s comment about questionnaires.

Yours sincerely,

Diana Eccles