Author's response to reviews

Title: Immunohistochemical profiling of benign, low malignant potential and low grade serous epithelial ovarian tumors

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Author's response to reviews: see over
Please find included the modifications we have brought to the manuscript in order to address the reviewer comments. Only one of the two referees asked for revisions.

1. The authors may need to reword in the following sections (suggested words are capitalized): "Background: Serous epithelial ovarian tumors can be subdivided into benign (BOV), low malignant potential (LMP) or borderline and invasive (TOV) tumors. Although the molecular characteristics of serous BOV, LMP and low grade (LG) TOV tumors have been known, definitive immunohistochemical markers to distinguish among these tumor types have only recently been defined."

   We have added the notion of immunohistochemistry to our statement and we have modified the sentence to include the notion of completeness which should address the reviewer's comment.

   Modification -> Although the molecular characteristics of serous BOV, LMP and low grade (LG) TOV tumors have been initiated, definitive immunohistochemical markers to distinguish between these tumor types have not been defined.

2. The authors may need to reword in the following sections (suggested words are capitalized): "Conclusions: This study supports previous studies showing that benign and malignant ovarian surface epithelial tumors can be distinguished based on an immunohistochemical perspective." This is because p21 has been reported as a marker to distinguish LMP/low-grade vs. high-grade serous carcinoma. Besides, there are many reports showing that several immunohistochemical markers can also differentiate
both types of tumors. These markers include Rsf-1, HLA-G among many others. Appropriate citations should be given for those markers.

We have changed the original sentence to more clearly define our impact. However, reviewer 1 refers to studies comparing low to high grade tumors, while here the focus is clearly benign, LMP and low grade. We have not studied high grade tumors in this manuscript, although we agree that low versus high grade tumors have been more carefully studied elsewhere.

Modification-> Conclusions: This study represents an extensive analyses of the benign and highly differentiated ovarian disease from an immunohistochemical perspective.

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