The Editor
BMC Musculoskeletal disorders

I was delighted to receive the constructive comments to my manuscript. All issues mentioned have been addressed and below I comment on each of them.

Comments to Reviewer 1.

Major compulsory revisions:

1. Issue addressed.
I have had the manuscript read and commented by a native English-speaking colleague and subsequently I have revised the manuscript accordingly.

2. Issues addressed.
I have shortened the discussion and, i.a., deleted the sentence quoted by the reviewer. I have elaborated further in the Results section as suggested.

3. Issue addressed.
This includes the description of unilateral dominant-hand symptoms in 16 patients and bilateral symptoms in five patients.

4. Issue addressed.
I agree that the description of the nerve tenderness is very important. In a former version of the manuscript this information was included in the Figure. However, when nerve tenderness was absent in all locations other than the brachial plexus, the posterior interosseous nerve, and the median nerve, I decided to exclude this information in the Figure and instead compare tenderness at these three locations to contra lateral soreness. This of course would mean that the information on mechanical allodynia at other locations should be given in the Result section of the text. It was my intention to do that, but for some reason it was not effected. In the present edition I have given the necessary details.

5. Issue addressed.
I have changed the word "injury" and instead now use the word "handicap" as suggested.

Minor essential revisions:

6. Issue addressed.
I have given more precisely the locations used for sensory testing.

7. Issue addressed.
I intended to refer to the passage of the median nerve below the arcade of the common superficial flexor muscle. I have shortened the phrasing just to indicate the locations at which mechanical allodynia was examined for.

8. Issue addressed.
I agree in the comment. The sentence has been changed.

The suggested reference which was familiar to me is certainly relevant and has been included.
10. Issue addressed.
The question raised about a potential strength-reduction due to pain has been dealt with in the methods section and in the discussion.

Reviewer 2.

Minor essential revisions:

1. The reviewer wishes a short explanation under each figure. I have, however, supplied legends for each figure and I believe that these legends would be attached to the Figures in the final formatted edition of the manuscript. I am in doubt whether the reviewer wants more explanation to the Figures. Should this be requested, I will make changes accordingly.

Discretionary Revisions:

1. Reports on Lab tests and x-rays. Such tests were applied but only on indication. It was my experience that they could generally not contribute to elucidate further the issue of damaged tissue and functional deficiencies. However, a dominant side cervical rib found by x-ray in one patient may have increased the vulnerability of this patient and contributed to the symptoms and findings.

2. It is correctly stated by the reviewer that conclusions from this small-scale clinical case study should be drawn with caution. It is a descriptive study of a rather small number of cases. Such a study may be useful for the generation of hypotheses, which, to my view may be of particular importance when cases share features with regard to exposure, symptoms, and physical findings. I have aimed not to conclude beyond what the study allows me to do. However, I believe that even with a much higher number of patients other results than the ones presented would be unlikely.

Sincerely

Jorgen Riis Jepsen, MD