Author's response to reviews

Title: Hemangioma of the prostate - an unusual cause of lower urinary tract symptoms : Case report

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Author's response to reviews: see over
Thank you for the thorough review of our manuscript. We very much appreciate the reviewers constructive comments.

Specific revision includes:

**Response to reviewer Makito Miyake:**

1. We consider that the LUTS was caused by hemangioma. This has now been addressed in the “case presentation” section.

2. The volume or occupation rate (hemangioma volume/ resected prostate volume) has been stated in the “case presentation” section.

3. In the discussion we have included our thoughts on whether prostatic hemangioma has the potency of regrowth or to progress to a malignant disease.

4. Information for the pre-operative rectal examination including 1) presence or absence of tenderness and 2) erythrocyte containing in prostate secretion has been added.

5. Preoperative Qmax and residual urine information have been added to the “case presentation” section.

**Response to reviewer Robert Svatek:**

1. The manuscript has been copyedited by a native English speaking colleague. Grammatic errors have been corrected.

2. Preoperative Qmax and PVR values have been added to the “case presentation” section.

3. In the discussion we have included guidelines on what to do differently in the following scenarios. 1) the setting of a patient with LUTS and evidence for a prostatic hemangioma based on ultrasound. 2) If during a TURP, one discovers evidence of a prostatic hemangioma, what maneuvers/techniques can be recommended?

**Response to reviewer Esther T Kok:**

1. The reviewer has asked us to emphasize the fact that the disease is rare in the discussion. We believe this is addressed adequately in the original manuscript, by the following statement in the discussion section; “Hemangioma located exclusively in the prostate is extremely rare and only few cases have previously been reported.”
Response to reviewer Bruce Kava:

(1) In the “case presentation” section, the phrase; “minor resection of both lobes (around 5 grams) were performed”, has been changed to; “transurethral resection of the prostate (around 5 grams) was carried out”.

(2) In the “discussion” section, the phrase “open prostatectomy is not recommended” has been changed to “One should be cautious in performing open prostatectomy”.

(3) In the “discussion” section, we have added a passage that describes the features that distinguish hemangioma of the prostate from ordinary BPH.

(4) Line 4 in the “case presentation” section has been changed to; “a normal sized prostate”

(5) Line 7 in the “case presentation” section has been changed to; “transrectal ultrasound reveled a 34 g prostate”

Response to editorial comments:

(1) We have expanded the abstract.

(2) We have expanded the background section.

(3) The manuscript has been copyedited by a native English speaking colleague.

(4) The authors’ contributions section has been elaboratedspecified according to the proposed format.