Reviewer's report

**Title:** Neoadjuvant hormonal therapy is a feasible option in laparoscopic radical prostatectomy

**Version:** 3  **Date:** 7 September 2012

**Reviewer:** Gianmarco Isgró

**Reviewer's report:**

1. Minor Essential Revisions. LRP is no more an "emerging" treatment for PCA.

2. Discretionary Revisions. There are few reports or RP after NH; however introduction should provide some insights also on the at least minor incidence of NHT on overall survival and disease free survival for high risk prostate cancer

3. Major Compulsory Revisions. this is the central point of the paper, as long as NHT has always been used for high risk PCA patients. a further description of baseline Pca in both group is mandatory. Use of D'Amico classification for pre operative risk stratification is warranted

4.Major Compulsory Revisions. Data seems to be correct and exposed clearly; the only remark is that it would be further explanatory to provide stratification of gleason score staging instead of simple mean and standard deviation; i.e.: gleason 3+3 group A, gleason 3+3 group B and so on...

5. Discretionary Revisions Again use of standard classification of complications as Clavien-Dindo would be more explicative and standardize

6.Major Compulsory Revisions. report of final pathology of the specimen of both group is mandatory

7.Major Compulsory Revisions. Refer to pre operative oncological risk and comorbidities among the two groups is warranted as previously highlighted

8. Major Compulsory Revisions. The discussion is very interesting and takes into account relevant papers on this topic (NHT and PCA); however a brief insight also in outcomes of open and robot assisted prostatectomy series and NHT could be useful

9. Minor Essential Revisions. Again reference to different risk categories would be needed in the conclusion; as the authors state a few lines before NHT might be beneficial only for high risk patients. Prostatectomy for Low and Intermediate risk PCa might be delayed (even for months) without altering pathological stage and oncological outcomes

**Level of interest:** An article of importance in its field
Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests