Author's response to reviews

Title: Urinary High Molecular Weight Matrix Metalloproteinases as non-invasive biomarker for detection of bladder cancer

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Author's response to reviews: see over
Dear Editor of BM urology journal

Find the attached files for our manuscript entitled “Urinary High Molecular Weight Matrix Metalloproteinases as non-invasive biomarker for detection of bladder cancer” after corrections.

I hope we answered the comments of the reviewers and we are willing to answer for any further comments.

Reviewer’s report 1 (Yasushi nakai)

# The objective in the part of abstract is different from that in the introduction (24-26th line and 74-76th). So the questions posed by the author are unclear. (Major compulsory revisions)

The objective in the abstract has been changes to be matched to that found in the introduction (74-76th lines).

#The characteristics of bladder cancer group and control group should be showed. (Discretionary revisions)

The patients’ characteristics in general are described in clinical features of bladder cancer patients part (78-89th lines) and we added table (1) describing clinical data for the subgroups (bilharzial and non-bilharzial).

#A mistake of space is in 85th line. (Minor Essential Revisions)

The mistake was corrected

#You excluded patients with blood or leucocytes in urine (93th line). Urologists suspect presence of bladder cancer when a test of urine shows hematuria or pyuria. So I think you should talk about the influence by excluding them. (Discretionary Revisions)

MMPs activities increase in the presence of infection of blood which may lead to false positive results (this is one of the main weakness of using MMPs as biomarker for cancer detection especially in urinary tract) for that reason the presence of blood or leucocytes were excluded from our study and the same thing was applied in previous studies.

# the definition of borderline significant should be shown. Otherwise you cannot conclude like in 201th -207th line. (Major Compulsory Revisions)
We have changed the borderline significant into near significant which is more realistic one.

#If you have the data of cytology in bladder cancer group, you can compare it with your result. (Discretionary Revisions)

the data for cytology of most of patients were not included in the study because the strategy in ENCI is to do endoscopic examination rather than cytological examination due to the limitation of its sensitivity.

#A mistake of form is in 185th line. (#10#) # #10#(Minor Essential Revisions)

The correction was done

#In 190th line the activity of MMP-2 and MMP-9 are not difference from those of table 3.(minor essential revisions)

The correction was done

Reviewer report # 2 (Masaoni Kuwada)

Discretionary Revisions

MMP activity is influenced by chronic inflammation, and bilharzia infection causes chronic inflammation. But this study revealed that urinary HMW gelatinases can not differentiate between bilharzial and non bilharzial bladder cancer subtypes. It is very interesting. I want to know clinicopathological features of bilharzial bladder cancer patients in this study. The patient's characteristics and pathological features must be showed, which are divided into subgroup with bilharzial bladder cancer and non bilharzial bladder cancer.

The patients’ characteristics in general are described in clinical features of bladder cancer patients part (78-89th lines) and we added table (1) describing clinical data for the subgroups (bilharzial and non-bilharzial).