Author's response to reviews

Title: Surveillance of Testicular microlithiasis?: Results of a UK based national questionnaire survey.

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Author's response to reviews:

Dear Editor

I am herewith re-submitting my revised manuscript "Surveillance of Testicular microlithiasis?: Results of a UK based national questionnaire survey" after duly responding to the referee's comments and revising the manuscript.

The following is my point by point response to the referee's comments and suggestions

Major Compulsory Revisions

1. Readership outside of the UK may not know who constitutes the membership of the BAUS. An elucidation of this group (who and where) would be helpful.

Response: I have described the BAUS membership clearly as follows.
"BAUS is the official national organisation (like the AUA in USA) of the practising urologists in the UK and Ireland" (Page 3 Line 22 -23).

2. A comment on the response rate (57%) should also be made - was any bias expected amongst those urologists who responded or did not respond?

Response: I have responded to the above comments as follows
We do acknowledge that the response rate to our questionnaire survey has been moderate, with only 57% returns. This has a small chance of bias towards urologists actively following microlithiasis returning the questionnaire, than those who are not keen on following them. However this is more likely to be due to the fact that the questionnaire was sent during school term holidays, when many urologists tend to be on annual leave. The returns were also fairly evenly distributed throughout the UK (Page 8; lines 16-21).

Discretionary Revisions

3. It would be useful if the authors could comment on the considerable delay that most patients with testis tumors (5-6 months in several studies) that are palpable take prior to seeking medical evaluation and the effect on treatment. As testicular cancer presently has such a high cure rate (exceeding 97%) what effect could be expected by earlier diagnosis?

Response: I agree with the referee that it is useful point to add to the article and added the following lines
It is also known from many studies that there is an average delay of 3-6 months between noticing a testicular lump and seeking medical advice without significantly affecting cure. With the cure rate for testicular cancer exceeding 90%, it is debatable whether an earlier ultrasound diagnosis will have any effect on the outcome than self examination (Page 8; lines 6-10).

I sincerely hope my revised manuscript will be satisfactory for publication

Mr S Ravichandran