Author's response to reviews

Title: Intraprostatic Botulinum Toxin Type A injection in patients with benign prostatic enlargement: Duration of the effect of a single injection

Authors:

João FA Silva (jfalturas@gmail.com)
Rui Pinto (ruipinto@mac.com)
Tiago G Carvalho (tgorgal@sapo.pt)
Francisco Botelho (francisco.botelho@sapo.pt)
Pedro N Silva (pedrocdns@hotmail.com)
Rui Oliveira (ruisoliveira@gmail.com)
Carlos Silva (carsil@med.up.pt)

Version: 2 Date: 7 July 2009

Author's response to reviews: see over
Dear Biomed Central Editorial Team

Regarding our recently submitted manuscript “Intraprostatic Botulinum Toxin Type A injection in patients with benign prostatic enlargement: Duration of the effect of a single injection” we are sending a revised version of the manuscript which I hope will address the reviewers' comments. We thank the reviewers for their critique of our work. Their suggestions helped us to improve our paper.

The revisions included in the manuscript and responses to issues raised by the reviewers are as follows:

**Reviewer 1: Hann-Chorng Kuo**

We would like to thank the kind comments made by the reviewer.

**Reviewer 2: Rahmi Onur**

An effort was made to improve the English and extensive parts of the manuscript were rewritten.

- The pages in text should have been numbered.
- Done.
- Paragraph starting with the sentence of “Most studies …..” needs to be carefully reviewed because of grammar errors and lack of interpretation. This paragraph should be re-written.

- This paragraph was completely re-written.

- Similarly, the last sentence of Introduction is ”Here we report, the time changes induced by a single injection of BoNT/A on prosate volume,……” which needs to be clarified.

- The sentence was re-written and the meaning clarified.

- An important limitation in patient selection is having frail/elderly patients with a mean age of 81 years. Moreover, these patients all had indwelling catheters. Do authors have pressure flow studies of patients’ in this group? How did they conclude that the retention is due to BPO? Bladder decompensation is a well known problem in this age group of patients. Was there a way to exclude a atonic or hypotonic bladder?

- Of the 21 patients, eleven found to be available. This number is quite low and limits definitive conclusions.

- Pre-intervention and post-intervention objective measurement of lower urinary tract behaviour by urodynamics is lacking. It would be better to give pressure flow changes after the BoNT/A, if present.

- All these issues were extensively discussed in paragraphs 5 and 7 of the Discussion section which was completely rewritten.

- Why did authors remove foley catheters after 1 month? Is there a specific reason, experience?

- This issue is now considered in paragraph 5 of Discussion section.

- Did authors consider prostate cancer in these patients who had a mean age of 81? What would have been the effects of prostate cancer to the injection of BoNT/A, if present? Were they expecting the same efficacy of BoNT/A as in BPH?

- This question is explained in the last part of first paragraph in the Methods section.
- Despite significant reduction in volume of prostate after BoNT/A injection, there is no accompanying decrease in PSA? If the hypothesis is atrophy and apoptosis, then PSA would have been decreased.

- This issue is now widely exposed in the third paragraph of de Discussion.

- What was the quality of life score at baseline? If there is no, how could a comparison be made by authors?

- Explanation in the seventh paragraph of the Discussion section.

- Discussion, second paragraph, last sentence: “Likewise, prostate size……” it does not sound the meaning- I suggest a clarification.

- Similarly, Discussion, third paragraph should be re-written.

- Sentence and paragraph rewritten.

- Overall, the weakest point seems to be the discussion of the mechanism of action of BoNT/A and several limitations regarding the design. Although, authors attempted to give explanations, I would suggest to detail the mechanism of action of BoNT/A and especially discuss the role of apoptosis, block of ACh receptors, effects of BoNT/A on afferent nerves and volume relation.

- These issues were discussed in more detailed and comprehensive approach in the second and fourth paragraphs of the Discussion section.

Reviewer 3: Carlo Magno

We would like to thank the kind remarks made by the reviewer.
We hope that our revised manuscript is suitable for publication

Sincerely

Francisco Cruz, MD, PhD

Department of Urology

Hospital S. Joao - Porto

Portugal