Reviewer’s report

Title: Unusual presentation of anetoderma: case report and review of the literature.

Version: 2 Date: 4 June 2004

Reviewer: Thilo Gambichler

Reviewer’s report:

Unfortunately the authors did not address all comments and the paper has not improved substantially. Some simple suggestions have been overlooked. Some of the figures are still of poor quality. The format of the text is not in accordance with author’s guidelines given by BMC. Here are in brief comments on major compulsory and minor revisions.

Title
Write: ….brief review…

Abstract
The abstract still contains details of subordinated significance, e.g., He had lumbar lordosis.....dental misalignment (if of significance, however (?), then it should also be discussed!). Replace the last sentence in abstract/conclusions with the second sentence in the conclusions section after the discussion.

Case presentation (not case report:)
Again, write the words haematoxylin and fibres consistently (e.g., page 4, line 4 and 5; page 6, line 10). Since BMC has its origin in the UK, I suggest to use consistently English style of writing.

Discussion
Delete the sentence “The mechanism of anetoderma….autoimmune pathogenesis” – the latter is discussed at the end of the discussion section.
The authors mentioned that anetoderma can be associated with orthopaedic anomalies, but they did not discuss those observed in their patient, were those just coincidental…?
It is of course not appropriate to display the table within the text of discussion.
The authors claim to give a review on anetoderma, however, this would also include, even in a brief review, that the description of differential diagnosis should be performed. As I suggested previously, anetoderma is closely related to other elastolytic disorders such as cutis laxa and mid-dermal elastolysis. It would be helpful for the reader to give a reference of these disorders. Further perifollicular elastolysis, pseudoxantoma elasticum-like perifollicular elastolysis, lichen sclerosus et atrophicus, atrophoderma of Pasini and Pierini etc. may be considered differentialdiagnostically.
Again, an imbalance of elastase/anti-elastase activity has frequently been discussed in anetoderma. Important references such as Ghomrasseni et al. Am J Dermatopathol 2002;24:118-29 and Venencie et al. Br J Dermatol 1997;137:517-25 have not been cited in the revised version as well. In this paper, only alpha-1-antitrypsin is mentioned.
The last paragraph deals with treatment options, the sentence “We could not find.....” fits better the first paragraph of discussion (write: melanocytic naevi).

References
Ref. 20 and 21, write only year, volume, and pages of the article.
What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

Statistical review: No

Declaration of competing interests:

None