Reviewer's report

Title: Schwannoma of the external auditory canal: A case report

Version: 1 Date: 13 November 2006

Reviewer: Alexandre R Bisdorff

Reviewer's report:

General
Authors present a single case of a rare benign tumour of the external auditory canal. Considering the criteria required by Head and Face Medicine for publishing single case reports, I wonder what is new in the present case report compared to the previous reports? Except for the fact that is an exceedingly rare condition and only few cases have been reported.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
Possibly the authors could add some value to the report by deepening the presentation on the clinical presentation and the discussion. Duration of symptoms? why did the patient only present when the canal was completely obliterated? A simple otoscopy should have lead the patient promptly to the specialist at an earlier stage. What is known about the speed of growth of the schwannomas of this location? In the discussion they authors state these tumours are slow growing, how can they tell for this location? The authors do not give any precision on the duration of follow-up period for absence of recurrence. What is known for recurrences in this condition from the literature? Depth of discussion, originating nerves (what other locations of C2/3 dependent schwannomas are known?) Are underlying conditions known associated with this location, any relation to Recklinghausen’s? How much diagnostic workup is useful? The authors indicate the staining to S100 in histology. This is not a very specific finding, it is not clear why they mention this without getting back to this point in the discussion. It is also no harm to present in a discussion limits of our knowledge on natural history of the condition and its management.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
P. 4 the authors state that CT scan is not a diagnostic tool, so what is it then? On the picture displayed is an isodense mass in the external auditory canal, it is not specified in the legend if it is the C+ or C- image. It would be interesting for the reader to see the contrast enhanced image.

Discretionary Revisions (which the author can choose to ignore)

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 importance in its field

Quality of written English: Acceptable