Reviewer's report

Title: A Silent Gigantic Solitary Fibrous Tumor of the Pleura

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Reviewer: Nathan M Mollberg

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Minor Essential Revisions

The authors present an interesting case of a giant asymptomatic solitary fibrous tumor. The figures are of good quality and the manuscript is written reasonably well. I have a couple of questions/comments that I would like the authors to address.

1. Why did the patient undergo chest x-ray and then CT if he had no chest symptoms? Malaise is a very non-specific symptom. Had the patient undergone other tests prior to the chest imaging?

2. The authors state that the patient had no prior asbestos exposure. This implies that at least mesothelioma was included in your differential diagnosis, what other diagnosis was considered and how did it affect your choice of imaging? For example was PET considered for staging purposes?

3. Did the patient have any other risk factors for malignancy (ie, family history, smoking history etc.). Who is at risk for developing SFT of the pleura?

I applaud my German friends for publishing in a foreign language, however, there are a number of sentences which are difficult to understand. I will list the sentences that I had trouble understanding.

1. A long follow-up period is as essential as complete resection of the tumor because recurrence may occur many years after the surgery, although the tumor has been identified as benign.

If I may suggest the following: Although SFT is benign, a long follow-up period is essential as even patients with complete resection are at risk of recurrence many years after surgery.

2. The solitary Solitary fibrous tumors (SFT) of the pleura are rare intrathoracic neoplasm...The sentence should simply read, "Solitary fibrous tumors (SFT) of the pleura are rare intrathoracic neoplasm.....

3. In our case, the patient, who had worked as a remover until 6 weeks prior to admittance, had no symptoms except malaise, although the tumor compressed the descending aorta and other mediastinal structures strongly, thereby shifting them to the right side.
If I may suggest the following: Although the tumor was large enough to push the descending aorta and other mediastinal structures to the right, our patient displayed no symptoms other than malaise.

5. As we went through our operative choice, the fifth intercostal space, we found the encapsulated circumscribed gigantic tumor.

If I may suggest the following: We chose the fifth intercostal space as our initial thoracotomy site. Upon entering the pleura we could easily visualize the encapsulated circumscribed gigantic tumor.

Discretionary Revisions

3. Please explain what a “remover” is to your colleagues who are unfamiliar with this term.

4. Please provide more detail in the discussion section. One sentence vaguely states, “it is a small percentage.”

**Level of interest:** An article of limited interest

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

**Declaration of competing interests:**

I declare that I have no competing interests.