Author's response to reviews

Title: A rare case of primary cardiac B cell lymphoma

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Author's response to reviews: see over
December 1st, 2013

Dear Dr. Bender,

Many thanks for considering our manuscript entitled “A rare case of primary cardiac B cell lymphoma” by Habertheuer et al. for possible publication in the Journal of Cardiothoracic Surgery.

Attached please find a point-by-point response to the suggestions of the reviewer. Additionally, we do provide a revised version as requested in your last email.

We do hope that the manuscript is eligible for possible publication in your journal in its current form.

Sincerely Yours,

Andreas Habertheuer, MD
Reviewer #1:

1. Malignant primary cardiac tumors have a dismal prognosis: without surgical resection, the survival rate at 9 to 12 months is only 10%. (ref 4)" This sentence seems to suggest that surgical debulking is the mainstay of therapy for PCL. While debulking may be necessary for cardiac stabilization, the treatment modality most likely to impact on the natural history of this disease is R-CHOP chemotherapy and the sentence should be adjusted to give a clearer overview of this. Suggest reading and referencing Miguel et al, J Intl Cardiology, 2011 (Article title "Primary cardiac lymphoma.") to illustrate this rather than the current reference 4.

We thank the reviewer for his positive feedback and for considering our manuscript for possible publication in the Journal of Cardiothoracic Surgery. The concepts of early surgical intervention/debulking in cases of impaired hemodynamic function vs. R-CHOP chemotherapy as the mainstay of medical therapy has been clarified. We also appreciate the reference to the article “primary cardiac lymphoma” by Miguel et al. The references have been adapted according to the reviewer’s suggestion.

2. At the end of the case report section it is unclear what is meant by "However, despite the high malignant nature of the lymphoma the regimen was initiated slightly delayed due to"...please clarify what is meant by slightly delayed

The rational behind the delay in application of R-CHOP chemotherapy was our major concern of possible ventricular ruptur due to tumor lysis and impaired wound healing. This statement has been clarified.

3. Typos in "highly suspicious for malign neoplasm" and "again raising concern of malign transformation."

All typos have been corrected.
4. In abstract "rituximab, cyclophosphamide, doxorubicin, vincristine and prednisone chemotherapy (R-COMP)." Use "R-CHOP" not R-COMP

R-CHOP is now used instead of R-COMP throughout the article

We thank the author for the positive feedback concerning our paper. All suggestions according to the reviewer have been revised.