Reviewer’s report

**Title:** Extrarenal multiorgan metastases of collecting duct carcinoma of kidney: A case series

**Version:** 3  **Date:** 2 July 2008

**Reviewer:** Sanjeevan Kalavampara

I am familiar with the literature and believe that this case meets one of the 9 criteria for evaluation in the journal: Other

If other, please specify:

Usual presentation of an unusual variant of a disease.

**Has the case been reported coherently?**: No

**Is the case report authentic?**: Yes

**Is this case worth reporting?**: Yes

**Is the case report persuasive?**: No

**Does the case report have explanatory value?**: Yes

**Does the case report have diagnostic value?**: No

**Will the case report make a difference to clinical practice?**: No

**Is the anonymity of the patient protected?**: Yes

**Comments to authors:**

Good to see that there is some improvement. However, some issues continue unresolved. It would be nice if you can get your article verified by a medical oncologist, as, to my knowledge, RCC is not treated by MVAC regime but TCC (of kidney as well). After confirming CDC, one may treat with MVAC but your patients were diagnosed having CDC only post-mortem, and hence MVAC might have been inappropriate. Or is there still something missing in your case reports?

Your presentation as ‘presented with fever. CT showed...’ does not give a smooth flow. Why did you think of getting a CT abdo? Abdo pain or tenderness or something? You may drop a line to give a flow to your presentation.

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

I declare that I have no competing interests