Reviewer’s report

**Title:** Pseudotumoral radionecrosis as a late radiation induced injury after 60 Gy Cobalt radiation of a mamma carcinoma: a case report

**Version:** 5  **Date:** 22 December 2008

**Reviewer:** Philippe PD Dartevelle

Which of the following following best describes what type of case report this is?: Unexpected or unusual presentations of a disease

Has the case been reported coherently?: Yes

Is the case report authentic?: Yes

Is the case report ethical?: Yes

Is there any missing information that you think must be added before publication?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: No

Does the case report have explanatory value?: No

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:

The manuscript did not highlight the main interests of the report (pseudotumoral aspect, therapeutic options). You did not focus the report on the difficulties to make the diagnosis of pseudotumoral radionecrosis and on the surgical strategy. The point is how to diagnose and how to treat chest wall radionecrosis.

The introduction did not tell us why this clinical report could be useful to our clinical practice. The case report was well written but some questions remained unanswered: Did you use an ipsilateral or contralateral latissimus dorsi flap. Was there any difference? Why didn’t you perform a biopsy of the « pseudo-tumor » before surgery? Although, the last chest tube had been removed at day 8, the patient was discharged at day 18. What did happen between day 8 and day 18?
The discussion is mainly focused on radiation induced complications prevention. This is an idea for the conclusion but this is not the discussion of the clinical case.

**Quality of written English:** Acceptable

**Declaration of competing interests:**

I declare that I have no competing interests.