Author's response to reviews

Title: Five year follow up of Japanese patients with Paget's disease of bone after treatment with a low dose of oral alendronate : a case series

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Author's response to reviews: see over
Dear Dr. Kidd,

Thank you for the comments of the reviewers and they have been helpful in allowing us to revise our manuscript. We have corrected the manuscript and also comment to reviewers, and added figures of X-ray findings as followed the reviewer’s comment.

**Reviewer’s comment** (Rohit Rambani)

Bisphosphonate is a standard treatment for the management of bone pain in Paget’s disease. The long term use of bisphosphonates has not been well documented in the literature but many reviewer article mentions its use for long term usage. A bigger series might be considered for publication.

**Response to the comment**

As the reviewer indicated that Paget’s disease of bone is relatively common in Europe, North America, Australia and New Zealand and a standard treatment for the management of bone pain in the disease. However, Paget’s disease is rare in Asia and a few reports concerning the treatment with alendronate for the pain of the disease. Furthermore, to our best knowledge, we could not find the report that long-term treatment with a low dose of oral ale donorate, especially for Asian patients. We think that suitable dose of alendronate for Japanese seems to be different from that for Caucasians because the dose of alendronate for the treatment of osteoporosis in Japan is half that used for the treatment of osteoporosis in Caucasian. Then, we reported the cases that were treated with a low dose of oral alendronate, and the pain in the disease improved after the treatment.

**Reviewer’s comment** (Naoto Endo)

Please describe the status of case, such as body weight, body height and previous illness and so on. Furthermore, Xray findings should be presented as figures in this manuscript.

**Response to the comment**
I added the status of cases and X-ray findings with figures as the reviewer indicated (first paragraph of case 1 and 2 in the case presentation).

**Reviewer’s comment** (Naoto Endo)

Is there any differences between two cases, one cases is well responding to bisphoshponate and another is non-responding case. What is the affecting factor to respond to bisphoshonate.

**Response to the comment**

We could not find any affecting factors that the patients respond to bisphosphonate in these cases. As we discussed, the treatment with a low dose of oral bisphosphonate might have some limitation for improvement of the pain even in Japanese PDB patients. In these case, it might be better to treat for the patient with a high dose of oral risedronate as the guideline in Japan.

**Reviewer’s comment** (Naoto Endo)

Non-responding case (Case 2) showed re-treatment twice. This indicates that this protocol including dose (low dose) is not appropriate. Higher dose may be appropriate for case 2 with PDB. How do the authors explain?

**Response to the comment**

I agree with the reviewer’s comment and discussed at the last paragraph in the part of “Discussion”.

Please find enclosed the revised version of our manuscript entitled “Five-year follow-up of Japanese patients with Paget’s disease of bone after treatment with a low dose of oral alendronate” (MS: 2037281320243354).

We would appreciate your kind consideration of its publication in *Journal of Medical Case Report*.

Sincerely Yours,

Kousuke Iba M.D., Ph.D.