Reviewer's report

**Title:** Small cell neuroendocrine carcinoma of the breast, a treatment between breast and lung: a case report

**Version:** 3  **Date:** 11 December 2008

**Reviewer:** Heather Wakelee, MD H Wakelee

**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?:** Yes

**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:**

In the case presentation the mention of mastectomy of lymph node dissection is done twice. Please revise the case presentation slightly so that the following sentences are not in the middle of the case discussion, "The biopsy of the lump revealed a SCNC of the breast. The patient was treated with mastectomy and local lymph node resection. Two separate revisions of the samples, one by the Pathology Department of “M. Malpighi” Hospital in Bologna and one by the Pathology Department of the Oncologic Institute in Milan (IEO) confirmed the diagnosis. ” It might be clearest to put the sentence about the biopsy as the third sentence in the case presentation (after the description of the mass and before the patient's history) and then, the second 2 sentences towards the end, where the other mention of the mastectomy is currently. A paragraph break just before the mention of the mastectomy would be helpful. Please verify the statement that SCNC of the lung is negative for both CK7 and CK20, usually it is CK7+ and CK20 -, similar to breast staining. All of the cytokeratin staining is
imprecise and a more thorough discussion about the probabilities of breast versus lung versus other origin depending on the staining would be more informative for the readers.

It would be informative to discuss how this particular regimen was chosen. Many readers may not be as familiar with the usual regimens used in SCNC tumors of as adjuvant breast treatment. Also, why was carboplatin chosen when cisplatin is the more standard for SCNC of the lung and there is no indication that the patient would have had difficulty with this regimen. Also, why were the regimens given in the order chosen as opposed to given the neuroendocrine regimen first?

I assume the patient had become post-menopausal by the time anastrozole was started, but this is not stated.

The conclusion of this paper is that a review of the literature data will be undertaken, but I assume this was already done for this report.

Quality of written English: Acceptable