Reviewer's report

**Title:** Testicular Tuberculosis presenting with metastatic intracranial tuberculomas: A case report.

**Version:** 1 Date: 17 May 2010

**Reviewer:** LAMPROS MITRAKAS

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?: Yes

Does the case report have explanatory value?: Yes

Does the case report have diagnostic value?: Yes

Will the case report make a difference to clinical practice?: Yes

Is the anonymity of the patient protected?: Yes

Comments to authors:

COMMENTS

A) General


B) Revisions necessary for publication

1) CASE REPORT 1st paragraph: "Patient's haematological…(52mm/hr)"
The authors do not mention if they made haematological test for malignancy markers (LDH, AFP, #·HCG). Since their initial diagnosis was testicular tumor (CASE REPORT 1st paragraph: "A clinical impression of a left testicular tumor..."), it is mandatory to check for these markers in the preoperative work up. In the first and last paragraph of DISCUSSION they do mention the significance of these markers. They must clarify if they looked for these special malignancy markers.

2) CASE REPORT 1st paragraph: "His abdominal ultrasound and chest radiograph showed no abnormality"

Since the initial diagnosis was testicular tumor they should perform a preoperative CT of the abdomen. Ultrasound is not sufficient for preoperative staging in these tumors. They had the ability to perform this CT (brain CT was done). The authors must clarify why they did not do an abdomen CT. (Was it scheduled for later for example?)

3) CASE REPORT 3rd paragraph: "...he was placed on antituberculous therapy (ATT)"

The authors must specify which was the exact ATT treatment that was administered to the patient.

4) CASE REPORT 1st paragraph: "They showed a heterogenous echopattern" (meaning the testes) and DISCUSSION 1st paragraph: "...multiple hypoechoic masses like non seminomatous testicular cancers as in our patient"

There is a contradiction between these. The authors have to clarify whether the echopattern was heterogenous as mentioned in CASE REPORT or hypoechoic as mentioned in DISCUSSION.

5) DISCUSSION 6th paragraph: "...could have benefitted from image guided biopsy...surgery"

To my knowledge a preoperative fine-needle aspiration (FNA) cytology could be performed (without being mandatory), and not a testicular biopsy, if the diagnosis of testicular cancer was excluded. In this patient the testicular tumor was the primary diagnosis. So when a diagnosis of testicular tumor is established neither FNA nor biopsy is recommended preoperatively. If someone decides to proceed to inguinal exploration for a testicular mass he can send a testicular biopsy for frozen section histological examination. Taking into consideration that the primary clinical diagnosis was testicular testis, the authors have to clarify if they believe that a preoperative FNA or biopsy would be beneficial for this patient. If they do not believe this, they must not refer to the diagnostic FNA or biopsy procedure.

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

I declare that I have no competing interests.