Reviewer's report

Title: Large cell non-Hodgkin's lymphoma masquerading as a renal carcinoma with IVC thrombosis: A case report

Version: 1 Date: 5 August 2010

Reviewer: Georgios Koutalellis

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?: No

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:

A) I agree that the treatment of primary renal lymphoma consists of chemotherapy associated with rituximab (CHOP-R) and a nephrectomy would be unhelpful. Other studies concluded that the patients whose lymphomas were completely resected macroscopically and who received combination chemotherapy with adjuvant radiation therapy had long disease free survival (1,2). I'd like to know your opinion, I mean do you agree about this treatment option? I believe that in the discussion you should explain more the other treatment options and why you prefer CHOP-R for the systemic chemotherapy.


B) I also believe that the majority of these patients were diagnosed after radical nephrectomy and renal biopsy isn't a routine method for the diagnosis of the renal tumors. So, renal or bone marrow biopsy are indicated only if there are features that would increase suspicion for a non-renal cancer.

Quality of written English: Acceptable

Declaration of competing interests:

'I declare that I have no competing interests’