Author's response to reviews

Title: Male Form of PMDS Type I: Hernia Uteri Inguinalis Presenting as Obstructed Inguinal Hernia

Authors:

Nishikant N Gujar (drnishikantgujar7@rediffmail.com)
Ravikumar K Choudhari (drravichoudhari@gmail.com)
Geeta R Choudhari (drgeetachoudhari@gmail.com)
Nasheen M Bagali (nasheenbagali@yahoo.co.in)
Harish S Mane (drhsmane@yahoo.com)
Jilani S Awati (drijilaniawati@gmail.com)
Vipin B Balachandran (drvbalachandran@gmail.com)

Version: 2 Date: 4 July 2011

Author's response to reviews: see over
To
The Editor in Chief
Journal of Medical Case Reports

Respected Sir

**SUB: Re-submission of case-report with revisions**

Firstly, allow me to thank the reviewers for their thorough perusal and valuable comments regarding the manuscript. The following are the changes that the authors have made to the document. They have been highlighted in yellow for your kind perusal:

- “The pathological report should be embodied within the main case report and no actual lab values are given”:
  - The histopathology sub-section of the report has been integrated into the main case report. Additionally, the values along with the laboratory reference ranges have been provided in Table-1 for your kind perusal.

- “The term Bibliography should be replaced by the word References”:
  - The term “Bibliography” has been replaced by the widely accepted “References”.

- “An effort should be made to correct the terminology, grammar and syntax errors”:
  - The document has been revised and edited for spelling and grammatical errors.

- “Authors would be encouraged to use the original references”:
  - The original reference for the first report of PMDS has been added and the references have been re-numbered to reflect this change. In addition, the other references were checked for their integrity.
Authors don’t justify enough how their case report would alter the established knowledge about this entity:

- Though there are already published cases of PMDS with uncomplicated inguinal hernia in literature, very few cases of PMDS with obstructed inguinal hernia have been reported. This case report must be considered as an addition to pre-existing reports.

The persistence of a large uterus like paramesonephric duct in a male patient is in itself clinically unusual. But when it forms a part of the contents of an obstructed inguinal hernial sac, it becomes an unusual and unexpected finding during the operation, and therefore, must be considered as a clinical rarity.

Here we wish to highlight that while dealing with patients having cryptorchidism associated with an inguinal hernia, the possibility of PMDS should be kept in mind by the surgeon.

Preoperative images would be very useful:

- As the patient presented with an obstructed inguinal hernia, no pre-operative USG was done as the diagnosis was straightforward. The patient was taken for surgery on emergency basis. A post-operative CT scan and lab investigations were done for academic purposes.

Please include the title of the case in the title page of the manuscript:

- The title page has been updated to meet with the journal’s specifications.

We hope that we have met the reviewer’s expectations about the standards of this paper and look forward to a favorable reply.

Thanking you

Kindest regards
Dr. Ravikumar Choudhari
Professor and Head of Department
Dept of Surgery
Al-Ameen Medical College
Bijapur
Karnataka
India
Phone: +91 94817 02728 / 99023 84271
Email: drravichoudhari@gmail.com