Author's response to reviews

Title: Minor Salivary Gland Mucoepidermoid Carcinomas: A Clinical Analysis of 5 New Pediatric and Adolescent Cases and a Review of the Literature

Authors:

Priyanshi Ritwik (pritwi@lsuhsc.edu)
Robert B Brannon (rbrann@lsuhsc.edu)

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Author's response to reviews: see over
Reviewer: Nikolaos Nikitakis

1) Although the described cases have been adequately described, it would be helpful to include representative clinical and histological images for individual cases.

Unfortunately, in this retrospective study it was not feasible to get the clinical pictures. We have incorporated the histolopathologic images (figure 3-6).

2) The abstract section is divided into 3 parts: Introduction, Case Presentation and Conclusions. In contrast, the text is divided into: Introduction, Materials and Methods, Results and Discussion. In other words, the manuscript was written following a study format but this is not reflected on the Abstract format. This discrepancy should be corrected.

We have corrected the abstract section to reflect the journal’s research paper format.

3) In the abstract, the authors could emphasize the fact that there were not cases of metastases or death due to the disease.

We agree that this is important and have added this in the abstract and in the results section of the paper.

4) In the materials and methods, the method used for the literature search could be described.

We have added this in the Methods and Materials section.

5) In the second paragraph of the materials and methods section, the authors state that they did not include some studies based on the lack of specific information on individual cases. Although their rationale is acceptable, they could still include these studies as references for those readers who may want to further study this subject.

We have included these references: references 21-37

6) In the results, a graph showing distribution of cases according to anatomic location would be a useful addition.

We have added this as figure 2.

7) In the results, the authors could mention which imaging modalities were used to determine tumor extension and bone involvement. This subject could be also
included in the discussion with regards to the most appropriate diagnostic imaging investigation for such cases.

We have added this section at the end of the discussion section, based on the discussions presented in the references. Not all the included studies specified imaging techniques used; further this was not within the scope of our study. Therefore we did not add this in the results section.

8) The age range of patients included in this study was from birth to nineteen years of life. Considering that other studies in pediatric and adolescent patients prefer to use a range from 0 to 16 or 18 years, the authors should state and justify their decision to use a broader age range (especially taking into account that a case of a 19 year old patient has been included).

We used this age range because it reflects the first two decades of life, which comprises pediatric and adolescent age groups.

We have also added another author, Dr Kitrina Cordel, who provided the photomicrographs of the histopathologic slides.

We remain thankful to both reviewers for their time and efforts in reviewing our manuscript.

Sincerely,
P. Ritwik