Reviewer's report

Title: Case Report: A Rare Lesion Around The Knee Synovial Hemangiohamartomas

Version: 2 Date: 26 March 2012

Reviewer: Sara Nasser

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:

The authors present a rare and interesting case that adds to the diagnosis, investigation and management of persistent knee pain and haemarthrosis in young patients. The case is presented coherently and is persuasive.

The abstract and certain parts of the main report are difficult to follow due to grammar, punctuation and syntax errors which should be revised.

For example:
“ We aimed to present a case of” would be better written as “ We present a case of”

"This lesion although rare should be thought in differential diagnosis" would be clearer as "This lesion, although rare should be considered as a differential
diagnosis"
“pain and swelling was especially aggravated” should be “pain and swelling were especially aggravated”

“peripheral nerve tissue”, “teenagers”, “synovial”, discrepancy and “longitudinal” are misspelled on at least two occasions in the abstract and main body.

Words should be capitalized following a full stop, as noted in these examples:
“patella tendon. We performed”, “longitudinal incision. Excised material”

Some sentences would be clearer with punctuation or addition of connective words for example:
“in the magnetic resonance imaging, T2 and fat suppressed images revealed”
“Excised material included arterial and venous vascular structures, which were found”

The discussion is well-structured and covers the relevant areas of diagnosis and management. The report mentions plain radiographs and describes MRI as “usually the diagnostic tool”. Elaborating on other image modalities that could be of diagnostic value may add explanatory value to the report (Is MRI the gold-standard diagnostic tool? What is the value of other imaging techniques?).

The report describes arthroscopic versus open surgical resection in the management of synovial haemangiohamartomas “in cases of focal or pediculated and appropriate size lesions”.

The actual findings of the biopsy remain unclear, especially the size of the specimen and whether it was resected completely. This should be clarified.

Was the biopsy performed through an open resection? If so, how and why was the decision made? (Did the MRI show the size of the mass?) Could the mass have been removed arthroscopically? If not, what was the clinical reasoning behind this decision?

In summary, this is an interesting and relevant case report which, following some revision, is worth publishing.

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

Declaration of competing interests:

I declare that I have no competing interests