Author's response to reviews

Title: Single-port laparoscopic adrenalectomy for right-sided aldosterone-producing adenoma: a case report

Authors:

Akira Sasaki (sakira@iwate-med.ac.jp)
Shigeaki Baba (shige_synd@hotmail.com)
Toru Obuchi (tobuchi@iwate-med.ac.jp)
Akira Umemura (kemuraau001@yahoo.co.jp)
Masaru Mizuno (mmizuno@iwate-med.ac.jp)
Go Wakabayashi (gowaka@iwate-med.ac.jp)

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Author's response to reviews: see over
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Professor Michael Kidd AM
Editor in Chief, Journal of Medical Case Reports

Dear Dr. Michael Kidd AM,

The comments of the reviewers have been helpful to us in revising our manuscript. We have attempted to address the questions and our responses are below:

**Editor in Chief:**
1. Please include the patient's ethnicity in the Case Presentation section. The Case Presentation should present all relevant details concerning the case. The case presentation should contain a description of the patient's relevant demographic information (without adding any details that could lead to the identification of the patient); any relevant medical history of the patient; the patient's symptoms and signs; any tests that were carried out and a description of any treatment or intervention. This section may be broken into subsections with appropriate subheadings. If it is a case series, then details must be included for all patients.

   The following sentence has been inserted in the Case presentation section: “A 39-year-old Japanese woman (body mass index of 18 kg/m\(^2\)) with a past medical history of hypertension was referred to our hospital because of hypertension and hypokalemia. She had a history of Caesarean section at 30-year-old”.

2. Please include the ethnicity of the patient in the abstract

   The following sentence has been inserted in the Abstract: “A 39-year-old Japanese woman presented with hypertension and hypokalemia”.


Authors’ responses to reviews

Reviewer #1
Comments to authors:
Congratulations, the SILS technique opens a new horizont and the cosmetic results and fewer hospitalized days are both important in order to generalize this new approach.

Thank you very much for valuing our report.

Reviewer #2
Comments to authors:
It would be nice if the authors discuss minilaparoscopic techniques (MLT) using 2-3 mm trocars, in which scars are barely visible after few months.

The following sentence has been inserted in the Discussion section: “The assistance of the needlescopic instrument does not compromise with the cosmetic outcomes; the fact is still considered to be one of the main advantages of SPLA over MPLA”.

MLT can be used as an alternative to Single port approach, with similar cosmetic outcome, while is more ergonomic for surgeons. In fact the most important aspect of Single port is really more nonergonomic comparing traditional laparoscopy. It usually needs new or different instruments.

The most important technical challenges for right SPLA are whether it provides a good operative field surrounding the right adrenal gland and is able to avoid clashing of the instruments. The technology advancement will primarily revolutionize the single-port devices such as multi-channel port, percutaneous needlescopic instrument, articulating instrument, and small flexible video-laparoscope.