Author's response to reviews

Title: Nonobstructive Hydronephrosis from Social Polydipsia: a case report.

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Author's response to reviews:

8/25/2012

Dear Editor,

Thank you for the opportunity to submit a revised version of our manuscript titled “Nonobstructive Hydronephrosis from Social Polydipsia: a case report.” for consideration for publication in the Journal of Medical Case Reports. We have provided a point-by-point response to the reviewers’ queries below. A “Marked Copy” highlighting the changes made is also attached with the “Revised Version.” We hope that the manuscript is now suitable for publication in the Journal.

Thank you.
Sincerely,

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Editorial team comments:

1) Include the ethnicity of the patient in the case presentation section of the manuscript

Response: we have included ethnicity of the patient in case presentation section of the manuscript (page 3)

2) Remove the consent uploaded as additional file to protect the patient’s identity

Response: we have removed the consent form from the uploaded files in order to protect patient’s identity
3) Use the term female in describing the patient’s gender both in abstract and case presentation sections

Response: we have replaced word “woman” by “female” in the manuscript (page 2)

4) Replace the header “The Case” to “Case Presentation.”

Response: we have replaced the header from “The Case” to “Case presentation”

Reviewer #1:

Query: 1. The case report is well written out but needs minor editing for grammar/spellings

Response: We thank the reviewer for the kind comments.

All the changes are highlighted in the marked copy of the manuscript. Below are several examples of revision:

A) Spelling mistakes corrected:

Page 1: word “healty” – corrected to” healthy”

B) Grammar mistakes corrected

1) One, however, has to be cognizant of newer outcome data from acute kidney
injury research that demonstrates a higher risk of developing chronic kidney disease and need for renal replacement therapy in patients with even mild increments in serum creatinine (punctuation added)

2) We highlight these issues using a unique case of nonobstructive hydronephrosis (NOH) associated with social polydipsia. (Preposition with added) page 3

3) Abdominal computed tomography (CT) revealed presence of moderate bilateral hydronephrosis and hydroureters (Figure 1, A). (Word performed removed from the sentence). Page 4

4) Despite any anatomical abnormality evident per cystoscopy, a right ureteral stent was inserted (Figure 1, B). (Article an removed prior to abnormality) page 4

5) Her laboratory data is shown in Table 1 (verb are replaced by verb is)

6) Patient complained only of intermittent, mild, bilateral flank pain that was unrelated to physical activity, but related at times to fluid intake ((sentence was revised)

7) After a delay of 6 months due to health insurance issues, a repeat CT and intravenous pyelogram by the patient’s urologist confirmed persistent moderate hydronephrosis on the right, and mild on the left side. (sentence was revised)

Query: 2. In addition to cystoscopy and CT scan, was a Lasix renogram undertaken at any point in the clinical course to define the anatomy of obstruction or level of obstruction if any.( before or after the interventions)
Response: We thank the reviewer for the valuable comments. Indeed Lasix renogram was undertaken during the clinical course with no obstruction detected. We have edited manuscript to include this information. (page 5)

Query: 3. the volume/ issue number should be in bold

Response: references were formatted with title of manuscripts and volume/issue highlighted in bold.

Query: 4.

Figure D shows both the left and the right kidney- it would be better perhaps to show only the right kidney before and after with the size indicated by arrows.

Response: We thank the reviewer for the valuable comments. Figure D was modified with inclusion of right kidney before and after intervention. Presence of hydronephrosis is pointed by arrows. Considering only mild to moderate hydronephrosis, no substantial change in size of the kidneys were reported on ultrasound.

Reviewer #2:

Query: Will need minor grammatical corrections

Response: We thank the reviewer for the valuable comments. Corrections in grammar described above (reviewer #1, response to query 1) and in marked
copy of the manuscript