Author's response to reviews

Title: Diffuse Large B Cell Lymphoma Presenting as Horner's Syndrome in a Patient Diagnosed with Neurofibromatosis Type 1: A Case Report and Review of Literature

Authors:

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Author's response to reviews: see over
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Dear Editor,

Thank you very much for your excellent comments. We have revised our manuscript according to the reviewers’ suggestions. The responses to both reviewers’ comments are shown below:

First Reviewer's report
Which of the following best describes what type of case report this is?: An unexpected association between diseases or symptoms
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:
Would remove reference to 1982 Working Formulation classification of lymphoma
Response: That particular reference was deleted and all other references were re-numbered.

Describe why the patient didn't receive rituximab along with CHOP
Response: Rituximab is not available to the majority of Thai patients as it is very expensive and the government does not pay for it unless you work for the government. Rich patients can pay for the treatment costs on their own. This patient is poor and is not a government officer, so he received only CHOPx8. Fortunately, he entered a CR.

It would be worth speculating as to why most patients with NF develop T cell lymphoma while most lymphomas world-wide are B cell lymphomas
Response: We have extensively reviewed the literature but could not find any evidence to explain why NF1 patients are predominantly involved by T-cell lymphoid neoplasms. This could be due to its rarity. Nevertheless, we have added our speculation about the association between lymphoma and NF1 in the last paragraph of the manuscript.

Quality of written English: Acceptable
Second Reviewer's report
Which of the following best describes what type of case report this is?:
Unexpected or unusual presentations of a disease
Has the case been reported coherently?: No
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?: No
Does the case report have diagnostic value?: No
Will the case report make a difference to clinical practice?: No
Is the anonymity of the patient protected?: Yes

Comments to authors:
This is an interesting case of DLBCL with NF1 presenting with Horner's syndrome. It will be more learning useful to the readers if the authors would add treatment outcome of the patient.

Response: The patient is currently doing well after 8 cycles of CHOP chemotherapy. Horner’s syndrome has been subsided and the tumor masses disappeared. We have already added this information in the manuscript. Thank you very much for your comment.

Quality of written English: Acceptable

Thank you again for your kind comments. We hope that you would consider our revised manuscript for publication in your open access journal.

Sincerely,

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