Author's response to reviews

Title: Monophasic Synovial Sarcoma presenting as a primary ileal mass: Case Report and Literature Review.

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Author's response to reviews:

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Title: Monophasic Synovial Sarcoma presenting as a primary ileal mass: Case Report and Literature Review

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Author's response to reviews: see over

The Biomed Central Editorial Team

Object: MS: Journal of Medical Case Reports manuscript: 1100014506558115

Primary monophasic ileal synovial sarcoma

Thank you for consideration of our manuscript for publication in your journal.

We have reviewed the above manuscript according to your reviewer’s comments.

Editorial comments:

Abstract:

The format: In keeping with journal style, please remove the subheading s in the
Case Presentation Section:

The abstract was reviewed and subheadings were removed and the formatting was changed as follows:

Abstract

Abstract: Synovial sarcoma is a rare malignant mesenchymal tumor mainly arising in the periarticular tissue in young adults. There are few cases reported in other different areas.

We report a 29-year-old Saudi lady of Arabian ethnicity with synovial sarcoma arising primarily from the ileum presenting with abdominal pain and incomplete intestinal obstruction.

The literature of this rare gastrointestinal tract sarcoma is reviewed; we believe the reporting of all rare or unexpected sarcoma presentations will add to the better understanding of this relatively unusual malignancy.

• Introduction Synovial sarcoma is a rare malignant mesenchymal tumor mainly arising in the periarticular tissue in young adults. There are few cases reported in other different areas.

• Case presentation We report a 29-year-old Saudi lady of Arabian ethnicity with synovial sarcoma arising primarily from the ileum. The literature of this rare gastrointestinal tract sarcoma is reviewed.

• Conclusion: synovial sarcoma can present in unusual anatomical site like gastrointestinal tract; we believe the reporting of all rare or unexpected sarcoma presentations will add to the better understanding of this relatively unusual malignancy.

General instructions as per your kind letter:

3. In keeping with journal style, please remove the subheadings in the Case Presentation Section

Done

4. Please replace the header “Background” with “Introduction”

Done

5. Please place the abstract on page 2 of the manuscript. It should be structured
into the following three sections:

Done

6. Please include the authors contribution section.

A paragraph was added to detail the contribution of each author as follows:

Dr. Alaa Alsharief : collect the data , informed consent ,write the manuscript , the organization of text and photos , literature review

“ Musa Fageeh: review the histopathological diagnosis, provide the magnified histological slide photos , follow up with other university for confirmation of histology and hisochemical diagnosis.

Yousof Alabdulkarim: provide the surgical details, follow up the patient progress and details of history and review the article and revise the manuscript”

7. Please include a conclusion section as the last section of the text. This should state what can be learnt from the case:

Done

Specific point to point revision as per the distinguished reviewer’s comments:

Reviewer # 1 (Dr Edgard Nassif ):

Will the case report make a difference to clinical practice?: No

We added a small paragraph in the discussion to conclusion the value of reporting unusual presentations of rare sarcomas as follows :

The clinical importance comes from the fact that sarcomas carry a slightly worse prognosis and need a closer follow up not miss any sign of local recurrence or distant metastasis.

We also believe that any rare presentation of any sub-type of sarcoma, should – carefully – be reported and documented to add to the relatively small pool of case in comparison to other common malignant tumours, in order to increase our knowledge and understanding of sarcoma in general.

Comments to authors:

Do you have a cytology on the ascetic fluid
Cytology was sent for routine cytology and was unfortunately was inconclusive

Do you believe that a biopsy on an enlarge cystic mass is recommended?

We added this paragraph to answer for this inquiry:

The large mass was composed also of a big solid component that needed to be investigated to eliminate the possibility of lymphoma or tuberculosis, in the other hand there was some radiological confusion about the origin of this mass and to some colleagues it was necessary to confirm it with a histological biopsy.

six month of follow up is short and it will be interesting to have a longer follow up?

There was a mistake in this piece of information: the patient was operated on the 15-12-2009 and she is still under follow up i.e. over eighteen months of follow up and this was corrected in the follow up (in the revised version).

Reviewer's report

Reviewer: Roland Leung

Has the case been reported coherently?: No

Revision of the whole case presentation to fill any missing information, and correct any languestic or grammatical mistakes to become as follows:

Does the case report have explanatory value?: No

A short paragraph was added in the discussion to try to explain the presence of this unusual sarcoma in the viscera of the small bowel.

As follows.

The other question that one may ask: why do these tumors shift to unusual sites and different tissues: and the honest answer—at this time at least—would by that we do not know yet the exact mechanism for such shift however though, the authors are involved in a bigger research that investigate the increased incidence of sarcomas in our Saudi population particularly in the northern region which is close to the war activities of both gulf wars and the military activities in Iraq for the last decade.
Will the case report make a difference to clinical practice?: No

This was discussed in the previous review and we have already added a paragraph in the discussion section.

We would like to express our great appreciation to both distinguished reviewers for their time and effort, as well as the to the Biomed editorial board for considering this paper for publication.

Dr. Yousof Alabdulkarim, Dr. Alaa Alsharif, Dr. Musa Faqiehi