Author’s response to reviews

Title: Posterior mediastinal ganglioneuroma with peripheral replacement by white and brown adipocytes resulting in diagnostic fallacy from a false positive 18F-2-fluoro-2-deoxyglucose-positron emission tomography finding: a case report

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Author’s response to reviews: see over
Editor's comments:

"-Thank you for your response to remarks of reviewers, however still some minor corrections are requested.

-Abstract, Introduction:

1-Fat containing ganglioneuroma(s) are reported, by adding (s).
We have revised “ganglioneuroma are” as “ganglioneuromas are” in response to your comment.

2-Clinical examination, and in particular 18 F-2-fluro .........etc, this imaging technique is not clinical and you have to rewrite the sentence accordingly.
Thank you for the suggestion. We have revised “Clinical examination” as “Radiological examination” in response to your comment.

3-Case presentation:
following intervention, the patient remained mild hypertension to be corrected to: remained with mild hypertension.
Thank you for your comment. We have revised the relevant sentence.

4-All the paragraph starting with:
Histological analysis of the specimen obtained by CT-guided biopsy........etc, should be moved to be placed before:
Since a malignant adipocyte tumour could not be ruled out, surgical resection ........etc
Thank you for your suggestion. We have made this change in the revised manuscript.

5-The sentence starting with: considering imaging features needs rewriting.
Thank you for your suggestion. We have revised the relevant sentence accordingly.

6-Conclusion:
which yielded (in) a false positive result, to delete (in)."
We have revised this sentence. Thank you for the comment.

Title: Posterior Mediastinal Ganglioneuroma with Peripheral Replacement by
White and Brown Adipocytes resulting in diagnostic fallacy from a false positive 18F-2-fluoro-2-deoxyglucose-positron emission tomography finding: One case report

**Version:** 2  
**Date:** 6 August 2014  
**Reviewer:** A PONNUSWAMY

Thanks for asking me to review the paper after revision. The paper was submitted in with the untracked changes and is cumbersome for the reviewer. However the content and the written English is much better and coherent.

The following (in underlines) are some of the minor issues that still needs rectification.

Bearing in mind the improved content and coherence and style of the paper I would suggest acceptance with rectified corrections

**Introduction** Ganglioneuroma is a rare tumour in the posterior mediastinum, and;

Fat-containing Ganglioneuroma is hardly observed and rarely reported.

**Case presentation** an asymptomatic 66 year-old Japanese female who had no significant past medical history was referred to University hospital for evaluation of her a posterior mediastinal mass. Although the size had not been changed for five years, with Follow-up, a malignant lipomatous tumour could not be excluded due to the presence of intratumoral fat and the result of increased FDG uptake observed by PET imaging. A computed tomography-guided core-needle biopsy revealed a mixture of mature Adipocytes, spindle-shaped cells, and a fibrotic tissue stromal. Definite diagnosis was not obtained possible, and surgical resection was performed. Three years after surgery the patient remains free of the disease.

Case report

A 66 year-old Japanese female (145cm, 47kg) was referred to University of Miyazaki hospital for evaluation of a mass in her the left-sided posterior mediastinum.

These passages have been revised.

We have also made the following changes:

1. The title is now presented in the sentence case.
2. In the acknowledgements section, Mr. Kuroki’s name has been corrected.
3. The brackets used around the article title in reference 15 have been deleted.