Author's response to reviews

Title: Giant schwannoma with extensive scalloping of the lumbar vertebral body treated with one-stage posterior surgery: a case report

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Author's response to reviews:

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Prof. Michael Kidd
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Title:
“Giant schwannoma with extensive scalloping of the lumbar vertebral body treated with one-stage posterior surgery: a case report”

Dear Prof. Michael Kidd

Thank you very much for your kind letter dated October 2, 2014. We hereby send our revised manuscript, which we would like to again have considered for publication in your journal. We have carefully incorporated the reviewer’s suggestions into the revised text, as described below:

Response to Reviewer 1

Reviewer 1 stated that, “You had better add intraoperative enlarged photographs if you could prepare them.”

Unfortunately, we cannot prepare such photos, except for an intraoperative photograph which has already been included in our manuscript as “Figure 3”. However, we have now enlarged the intraoperative photograph shown in Figure 3 in response to this suggestion.

Response to Reviewer 2
1) Reviewer 2 stated that, “You should clarify new points of the current report compared with previous reports. What is the advantage of your surgical procedure?” and “You should also describe some advantages of this spinal reconstruction compared with previous reports.”

Based on these comments, we added a description regarding the advantage of our surgical procedure compared to the previous reports.

2) Reviewer 2 stated that, “Why could you do total resection of tumor?” As for the type of tumor, was anything characteristics?” and “Did you have a neuro-monitoring during the tumor resection?”

Thank you very much for your valuable questions. Except for the size, that is, a very large tumor and a large scalloping lesion of the vertebral body, we could not find any characteristic features of the tumor in terms of either the intraoperative or pathological findings. We also used neuro-monitoring, including MEP and SEP, during the surgery, and we tried to perform a total tumor resection with the assistance of the neuro-monitoring because we wanted to prevent a local recurrence of the tumor. This was despite the fact that the preoperative examinations, including MRI, suggested that it was a benign schwannoma. We have added a description regarding this point to the revised manuscript.