Author's response to reviews

Title: Successful treatment for retroperitoneal cavernous hemangioma adjacent to the renal hilum via the laparoscopic approach: a case report

Authors:

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Version: 2
Date: 30 October 2013

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Version: 1 Date: 30 October 2013

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Object: Journal of Medical Case Reports MS: 1130929551004336
Successful treatment for retroperitoneal cavernous hemangioma adjacent to the renal hilum via the laparoscopic approach: a case report
Tsukasa Igawa, Shin-ichi Watanabe, Toru Onita and Hideki Sakai

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

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

Reviewer #1 (Dr. Sathish Kumar)

COMMENTS:
The addition of other modalities of treatment available may be beneficial.

We appreciate the referee’s comment. Even if its pre-treatment diagnosis has been made, surgical resection could be a main therapeutic intervention for these retroperitoneal tumors at this moment. Kinds of molecular targeted therapy (e.g., pazopanib) or radiation therapy including ion beam radiotherapy are applied for only a small part of retroperitoneal tumors. However, these treatment modalities are still challenging. According to referee’s comment, we have added a few sentences in discussion part as follows.

Page 6, line 19-23

As for the therapeutic intervention, surgical resection could be only and the most effective treatment for retroperitoneal tumors at the moment. Other treatment modalities, for example, kinds of molecular targeted therapy, chemotherapy or radiation therapy are tentatively applied for a small part of cases.

October 29, 2013.
Reviewer # 2 (Dr. Azad Hawizy)

COMMENTS:
We recommend the case report to be published with minimal change that is the low and high intensity of MRI changed to low and high density.

Thank you for referee’s recommendation regarding the terminology of MRI findings. However, we believe that the term of “intensity” has been generally used to describe MRI image findings. To avoid confusion, we have changed the term “intensity” to “signal intensity” throughout the manuscript. According to this change, revised parts are highlighted in revised manuscript.

We also checked our manuscript style according to the comments from journal editorial team.

Comments from Editorial Team:

1. Please include all the co-authors’ email addresses in the Title page.
   Done
2. Please change the description of the patients gender from woman to female.
   Done
3. Please include an acknowledgement section at the end of the manuscript before the reference list.
   Done

Sincerely,

Tsukasa Igawa
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