Author's response to reviews

Title: Multidisciplinary approach in an unusual presentation of locally advanced gastric cancer. A case report.

Authors:

  Nicola Carlonagno (nicola.anita@tiscali.it)
  Fabrizio Schonauer (fabrizio.schonauer@unina.it)
  Vincenzo Tammaro (vincenzo.tammaro@unina.it)
  Annalena Di Martino (annalena.dimartino@gmail.com)
  Carmen Criscitiello (carmen.criscitiello@ieo.it)
  Michele L Santangelo (misantan@unina.it)

Version: 5  Date: 23 October 2014

Author's response to reviews: see over
Reviewer's report

Title: Multidisciplinary approach in an unusual presentation of locally advanced gastric cancer. A case report.

Version: 4 Date: 11 September 2014

Reviewer: Efstathios Kotidis

Which of the following following best describes what type of case report this is?: Unexpected or unusual presentations of a disease
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?: No
Is this case worth reporting?: No
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?: No
Is the anonymity of the patient protected?: Yes

Comments to authors:
The case you presented is a perfect example of what NOT to do in case of advanced inoperable gastric cancer. If an elderly patient is considered unfit for neoadjuvant chemotherapy she is definitively unfit for major surgery like the one you have described. The patient passed away from pneumonia and this was directly related to the major operation she underwent. We cannot claim that pneumonia was completely irrelevant. I understand that you had to give a solution in an unusual case, however you could have tried to stent the tumor first, in order to help the fistula heal and support the patients nutrition with a nasojejunal tube. In any case publishing this case may create a false impression that there are no limits to what a surgeon should operate on. I believe that your patient should only receive palliative treatment and you should not proceed to such an extensive dissection. Your result confirms that your choice to operate on was not right. Thus, I suggest that this paper should not be published.

We read the comments done by EK, who is offering a different solution to our difficult and unusually case, and obviously we don’t agree with his considerations and his suggestion of a conservative treatment. Certainly we always consider the possibility of a conservative treatment when possible but we think that in this case our choice was the right therapeutic option.

We are surprised about the proposal of “stenting the tumor” and “let the fistula heal”. We are not describing a common fistula but a relevant parietal disorder. By definition a tumor fistula WILL NEVER HEAL considering that the lesion, at that time, already eroded a good portion of the abdominal wall, and healing of the leak would be unlikely or during years (certainly longer than life expectancy) with poor life quality and would be not accepted by the patient (in Italy health system law clearly says that the patient has to be informed about treatment solution and has to agree to it).

Instead we firmly believe that, as well as it has been a palliative treatment, resection had to be attempted and reconstruction performed at the same time so to consent a good remnant patient life quality.
Level of interest: An article of limited interest

**Quality of written English:**
Needs some language corrections before being published

The paper has been revised by Ms. Juliet Ippolito B.A, Vassar College, M.Phil. University of Dundee, for English language editing.
Reviewer’s report
Title: Multidisciplinary approach in an unusual presentation of locally advanced gastric cancer. A case report.
Version: 4 Date: 29 August 2014
Reviewer: Theodossis S. Papavramidis
Which of the following following best describes what type of case report this is?: New associations or variations in disease processes
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?: No
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?: No
Will the case report make a difference to clinical practice?: Yes
Is the anonymity of the patient protected?: Yes
Comments to authors:
This is a well-written case report. The only addition that may add to the value of the manuscript is a short paragraph concerning the problems that large tumors may introduce to the intra-abdominal pressure. Large tumors may influence both the abdominal muscles (Kotidis et al. J Surg Res. 2012 Jul;176(1):102-7.) (Kotidis et al J Surg Res. 2011 Dec;171(2):609-14.), abdominal compliance (Papavramidis et al J Emerg Trauma Shock. 2011 Apr;4(2):194-7.), and abdominal pressure itself (Papavramidis et al. BMC Gastroenterol. 2009 Jun 6;9:42.).

We read the comments of TSP and are honored for his kind words
In our case and the pathophysiology of the patient is quite different to that described into the articles mentioned by the author. At the time we observed the patient there was no elevation of intraabdominal pressure (the lesion already eroded a relevant part of the abdominal wall) and no ascetic fluid. At the same time the therapeutic solution adopted did not determine an elevation of intraabdominal pressure

Level of interest: An article whose findings are important to those with closely related research interests
Quality of written English: Acceptable
Declaration of competing interests: 'I declare that I have no competing interests'
Reviewer’s report
Title: Multidisciplinary approach in an unusual presentation of locally advanced gastric cancer. A case report.
Version: 4 Date: 15 August 2014
Reviewer: Ludovico Docimo

Which of the following following best describes what type of case report this is?: Unexpected or unusual presentations of a disease
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?: No
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?: No
Is the anonymity of the patient protected?: Yes

Comments to authors:
This is a well written case report describing an unexpected, unusual presentation of an advanced gastric adenocarcinoma shown to be of neuroendocrine type at hystology. Authors described and critically reviewed the clinical presentation and management of the disease serving as a teaching point for the readers of the journal. A further english language revision is warranted.

Level of interest: An article of importance in its field
Quality of written English: Needs some language corrections before being published

The paper has been revised by Ms. Juliet Ippolito B.A, Vassar College, M.Phil. University of Dundee, for English language editing.

Declaration of competing interests:
I declare that I have no competing interests