Author's response to reviews

Title: Three cases with unusual presentation of primary hyperparathyroidism

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Author's response to reviews: see over
Dear Editors and Reviewers:

Thank you for your letter dated 22 January 2015, and the reviewers’ comments concerning our manuscript entitled “Three cases with unusual presentation of primary hyperparathyroidism” (MS number: 1295413286145258). Those comments are really thoughtful and helpful for revising and improving our paper. We have studied comments carefully and have made correction which we hope meet with approval.

Revised portion are marked in red in the paper. The corrections in the paper and the responds to the reviewer’s comments are as flowing:

Responds to the reviewer’s comments:

Reviewer #1:

Thanks for your comments on our paper. We have revised our paper according to your comments:

About “Minor compulsory revisions”

(1) “… and a review of the literature” in title and “… for difficulties in diagnosis” in abstract were deleted.

(2) “giant cells tumour” (line 37) was corrected as “giant cell tumour”.

(3) The background was revised according to the Reviewer’s suggestion.

(4) Comment: Case 1: “Superficial-erosion” and “polynesian” – what does this mean?

Response: “Superficial-erosion radiolucent lesion” was not so appropriately and was replaced as “osteolytic lesion”. “polynesian”
means multiple lesions.

(5) The contents about “incidence of HPT” and “histopathological differential diagnoses” in discussion part had been revised according to the Reviewer’s suggestion.

**About “Discretionary revisions”**

(1) Line 20, “osteitis fibrosa cystic” was added.

(2) We have changed the tense from past to present in line 24.

(3) Line 22, “broun” was corrected as “brown”. Line 26, “was admitted” was moved to the beginning of the sentence. Line 28, “the remaining case” was corrected as “third”. Line 29, “his bilateral” was corrected as “both”.

(4) Line 88 “The pathological diagnosis was a giant cell lesion” was corrected as “…giant cell granuloma”.

(5) Line 91-92, some laboratory findings were deleted.

(6) Comment: Line 123 “..in other positions”, what does this mean?

**Response:** This patient had several fractures in several position (his right femur, right scapula and ribs) due to serious osteoporosis. Our surgeon were afraid of causing more fractures in other bones, therefore surgical intervention was contraindicated. “…which may easily cause fractures in other positions” this sentence just represented our surgeon’s worry. According to the Reviewer’s
suggestion, we had deleted this sentence.

(7) Line 163: “phenotype” was replaced as “normocalcemic HPT”.

(8) Line 176: The other two cases also illustrate this.

(9) Line 173: “head bones”; line 180: “tumor”; line 180: “neoplasm”; line 190: “challenging”, “mimics”; line 198: “uncommon”; line 228-229: “GCT” were all revised and marked in red in the paper.

(10) Line 155-160 were deleted according to the Reviewer’s suggestion.

(11) Figure 1. Line 351, “superficial-” was corrected as “osteolytic lesion”. And a microphoto of Figure 1B was added.

Reviewer #2:

Thanks for your comments on our paper. We have revised our paper according to your comments:

1. Line 20, “PHTP” was corrected as “PHPT”.

2. We have specified “PTH” in the background.

3. We have defined “PHPT” in the background, “Ca” in Table 1, “CT” (line 79) and “MRI” (line 88-89) in the text according to the Reviewer’s suggestion.

4. We have specified that all these 3 cases are Asian in revised paper.

5. All the “mol/l” have been replaced as “mol/L” in the text and Table 1.

6. We are very sorry for our negligence of reporting a different percentage
of parathyroid carcinoma in background and discussion. The percentage of parathyroid carcinoma in background has been corrected.

7. Line 165 and 220, “hyperparathyroidism” were replaced as “HPT”.

8. All figures are labeled with arrows to help identify the lesions.

We hope the Reviewers and the Editors will be satisfied with the revisions for the original manuscript.

Once again, thank you and all the reviewers for the kind advice.

Thanks and Best regards!

Yours Sincerely,

Dr. Liu

2015-2-3