Author’s response to reviews

Title: The use of cinacalcet hinders the diagnosis of parathyroid carcinoma in a chronic dialysis patient: A case report

Authors:
Daisuke Takada (daisuke.gaotian@gmail.com)
Tatsuo Tsukamoto (t-tsukamoto@kitano-hp.or.jp)
Miho Fuse (balloonmiho@yahoo.co.jp)
Shinpei Kada (skada@ent.kuhp.kyoto-u.ac.jp)
Motoko Yanagita (motoy@kuhp.kyoto-u.ac.jp)

Version: 1 Date: 15 Sep 2017

Author’s response to reviews:

09/16/2017

Dr. Emma Cookson
Editor at the BMC series

Dear Dr. Emma Cookson,

CC Ms. Hayley Henderson,

I appreciate you and reviewers to evaluate our manuscript entitled "Cinacalcet might connive parathyroid carcinoma in a chronic dialysis patient" (Manuscript number BNEP-D-16-00684), and to find our case report to be interest. Herein, I am going to send a revised manuscript that would hopefully be responded to comments by you and reviewers.

Co-authors and I believe our case report can contribute not only to consider how to use cinacalcet without overlooking parathyroid carcinoma but also to manage mineral bone disorder of hemodialysis.

Once again, I would greatly appreciate it if you could review our paper at your earliest convenience.

Thank you for your consideration.
Sincerely yours,

Daisuke Takada, MD
Department of Nephrology, Graduate School of Medicine, Kyoto University
54 Shogoin-Kawahara-cho, Sakyoku, Kyoto 606-8507, Japan
phone: +81-78-751-3860
fax: +81-78-751-3859
e-mail: daisuke.gao@tian@gmail.com

Response to Stuart Sprague (Reviewer 1),

We appreciate your evaluation and comments for our manuscript entitled "Cinacalcet might connive parathyroid carcinoma in a chronic dialysis patient" (Manuscript number BNEP-D-16-00684). We are going to respond your comments one by one and revise the manuscript, as below.

1. I do not believe connive is the correct term to use in the title or as a descriptor of cinacalcet's activity

According to your suggestion, we replaced the all terms including our title; “The use of cinacalcet hinders the diagnosis of parathyroid carcinoma in a chronic dialysis patient: A case report”, and replaced the sentence; P2 L16-18, P5 L1-2, P6 L27.

2. The case is not presented in a clear manner. I am confused as to how did the calcium and PTH drop when the patient was taken off of cinacalcet.

I am sorry for the confusion. After the withdrawal of cinacalcet, serum Ca even increased, whereas iPTH level remained low due to the use of alfacalcidol as indicated in Figure 2. After parathyroidectomy, on the contrary, iPTH level dropped significantly.

Therefore, we added the sentence to P7 L16-17 in the revised manuscript.

3. I do not believe you clearly demonstrated that the patient had parathyroid cancer

Thank you for your important suggestion. I agree that parathyroid cancer was not diagnosed by the structural atypia absolutely and specifically. The pathological diagnosis of parathyroid cancer was based on a report by Schantz and Castleman [1], but the several points were not specific to cancer and sometimes observed in parathyroid adenoma as well. Therefore, the diagnosis of cancer is frequently base on the findings of capsular or vascular invasion[2]. In addition, parathyroid cells were invaded into the surrounding muscles pathologically and macroscopically in this case, which is considered to support the diagnosis of parathyroid cancer under uremic condition.
We included the description according to your suggestion, and added the detail including two references [3, 4] to P6 L1-2, and added the sentence to P5 L23-25 and P11 L15, which revealed that the presence of invasion into the capsule appears to correlate best with cancer diagnosis.

Response to Ercan Ok (Reviewer 2),

I appreciate your comments for our manuscript entitled "Cinacalcet might connive parathyroid carcinoma in a chronic dialysis patient" (Manuscript number BNEP-D-16-00684).

Thank you for your agreement to our claims.

Other corrections,

According to the Instructions for Authors on the journal style, I changed and show by a run of the item below;

- Replaced all the units into SI units in manuscript and figure.2.
- Deleted the line feed
- The four references were “Not Validated”, so we describe reference number in revised edition and the PMID (indexed for MEDLINE);
  16: PMID: 16457158
  17: PMID: 26312219
  19: PMID: 3589961
  29: PMID: 14520607
- Multi-panel figures (in figure.1) as a single composite file that contains all parts of the figure.
- Included Table.1 in the main manuscript file
- Added figure.1 title
- Replaced the Title end from “; case report” to “; A case report”

References

