Author's response to reviews

Title: Clusterin transcript variants expression in thyroid tumour: a potential marker of malignancy?

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Author's response to reviews: see over
Dear Editor,

We are submitting herewith the revised version of our manuscript (Ms. Ref. No.: 3489854601429713) entitled “CLUSTERIN TRANSCRIPT VARIANTS EXPRESSION IN THYROID TUMORS: A POTENTIAL MARKER OF MALIGNANCY?,” by Paolo Fuzio, Anna Napoli, Anna Ciampolillo, Serafina Lattarulo, Angela Pezzolla, Nicoletta Nuzziello, Sabino Liuni, Francesco Giorgino, Eugenio Maiorano and Elda Perlino.

We hope the revision you suggested has improved the quality of our paper.

Reviewer #2

Minor Essential Revisions:

1. The manuscript would significantly benefit from additional English language copy editing.

“The manuscript was further revised, as suggested”

Discretionary Revisions:

2. It would be of interest to this reviewer if the authors included data regarding the patients' progression of disease (presence of nodal and/or distant metastasis, subsequent recurrence of disease, death, etc.), and comment on any trends in CLU2/CLU1 expression variances which perhaps correlate as prognostic factors. However, this reviewer recognizes that such information may be limited by the small study size, and may indeed be beyond the scope of the manuscript (which merely seeks to demonstrate potential utility as a diagnostic, rather than prognostic biomarker).

“We surely agree with the referee in that investigating the possible role of Clusterin in thyroid tumors prognosis would provide additional interest to the results of our paper and, indeed, we had considered this issue at the beginning of the project. Nevertheless, it is well known that thyroid tumours, especially the well differentiated types (which represent the dominant part of our cases), follow a very indolent course and though we detected a limited number of lymph node metastases, their number was inadequate to draw any significant conclusion. The same also applies to tumour recurrences, which, though present in our series, were too limited in number to allow statistical analyses and, above all, seemed more strictly related to tumour size and extra capsular spread than to Clusterin expression. Based on these premises, we decided not to analyse Clusterin as a potential prognostic marker and focus the paper on its role as a diagnostic aid, as already suggested by the Reviewer. (See Discussion – page 11 line 317)"

3. Figure 4A would possibly be more clear if it were rendered in the bar/error-bar format of the other figures (or with range/error bar rendering instead). This is a purely stylistic recommendation, however.

“Figure 4A has been clarified by adding format bar / error - bars, as suggested”

We hope to have taken on your suggestions in a satisfactory way and that our paper is now ready for publication on the BMC Cancer.

I look forward to your reply

Best Regards,
Elda Perlino