Author's response to reviews

Title: Choroidal metastases from thymic carcinoma during pregnancy: Case Report.

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Author's response to reviews: see over
Dear Doctor Solera, dear Professor Subrayan, dear Professor Sakiyama, dear ladies and gentlemen,

thank you very much for your message dated September 2\textsuperscript{nd} 2015 and the opportunity to submit a revised version of our article now entitled *Choroidal metastases from thymic carcinoma during pregnancy: Case Report* for consideration for publication in *BMC Cancer*. The insightful comments and suggestions by the reviewers were highly valuable and have, to our opinion, largely improved our manuscript. We have addressed all reviewer comments as outlined in our point by point reply, and the manuscript has been amended accordingly. Changes in the manuscript have been marked by red print.

Again we would like to thank the Editor and the reviewers for their helpful suggestions and the possibility to resubmit a revised manuscript for consideration for publication in *BMC Cancer*.

For the authors,
sincerely yours,

Sebastian P. Haen
Reviewer #1: Visvaraja Subrayan

Reviewer’s report:

General:
The style of English writing is much to be desired although at a first glance the grammar appears to be satisfactory. This is a common issue with non native English speakers and can be easily corrected with better editing.

We thank the reviewer for the recommendation to undertake efforts to improve English grammar. We therefore obtained assistance from our office manager who is a native English speaker. Many passages of the article were revised. The changes undertaken are marked by red print in the manuscript (page 3, lines 2 and 13; page 4, lines 3, 9 and 13; page 5, lines 2, 6, 10 and 22; page 6, lines 1, 3, 6, 16 and 21; page 7, line 1 and 24; page 8, lines 3 and 7). Furthermore, we acknowledged her work in the acknowledgement section (page 11, line 7).

Title:
I feel the title should be simplified to “Choroidal metastases from thymic carcinoma during pregnancy: Case Report.” The term “Subacute onset of Blindness” can be improved.

We thank the reviewer for this recommendation and changed the title accordingly. The new title now reads Choroidal metastases from thymic carcinoma during pregnancy: Case Report (page 1, line 1).

Abstract:
The discussion should be on choroidal metastases and not paraneoplastic syndromes. The authors should keep it in line with the title.

We thank the reviewer for this comment and modified the abstract accordingly (page 2, lines 6 and 16). The discussion of the dermatomyositis was removed from the abstract conclusions. However, we feel that the description and discussion of the potential paraneoplastic syndrome is an important part of this case report (please refer to our reply to the reviewer’s comment regarding the discussion section on page 3 of this reply letter).

Case presentation:
“The decrease in visual acuity was initially interpreted as manifestation of the reappearing dermatomyositis and treated with steroids.” – Was the fundus checked then? Please give details as there maybe medicolegal implications.

We thank the reviewer for this remark and agree that this circumstance requires clarification. After recurrence of the dermatomyositis and progressive visual loss, the patient was examined twice by an ophthalmologist without pathological results. Therefore,
immunosuppressive medication was initiated. After failure of this treatment, repeated ophthalmologic examination revealed the choroidal metastases.
To clarify this we modified the respective description on page 5, starting from line 14.

Discussion:
The authors have not convincingly interpreted that the dermatomyositis is a paraneoplastic syndrome. Maybe this can be left out of the paper.
We thank the reviewer for this commentary and can understand his notion that we are not able to definitely prove that the dermatomyositis was a paraneoplastic syndrome of the thymic carcinoma in our patient. However, we believe that the appearance of symptoms concomitantly with the clinical manifestation of a solid – and also fatal – tumor is a central and important observation. It is suspicious that symptoms of a paraneoplastic syndrome that has been reported to be associated with a tumor diagnosis appear and aggravate alongside tumor progression and spreading, even more so since a formerly successful therapy turns ineffective. Already in the initial version of the manuscript we avoided to state a proven association between the dermatomyositis and the thymic carcinoma but assumed that these two diseases might be connected. We therefore believe that inclusion of the dermatomyositis into our case presentation provides with an important overview of the clinical conditions of the patient and also propose a more definite assessment of such patients with regard to a search of an underlying malignant disease. In our case, a very early detection might have resulted in a much better prognosis as compared to the advanced stage when the patient was transferred to us.
Therefore, we would like to keep the presentation and discussion of the dermatomyositis in our case report. In order to clarify the merely assumed association between the thymic carcinoma and the dermatomyositis we revised the manuscript on page 8, line 13. We hope that thereby this issue is sufficiently addressed.

The discussion is too brief. It should be lengthened to discuss choroidal metastases in general and its manifestations. It should include a recent literature review of other uncommon tumours presenting with choroidal metastases. Also a discussion on the other metastases from thymic carcinoma should be included.
We thank the reviewer for the recommendation to elongate the discussion parts in the case presentation. The recommended sections were added to the manuscript.
On page 7, starting from line 11 the manuscript was amended with a new section on the general appearance of choroidal metastases. In this section, we also included a review of the actual literature reporting on choroidal metastases from infrequent causes. The respective references were added to the reference list.
Furthermore, we amended the manuscript with a new section on the metastatic spread of thymic carcinoma was added on page 7, beginning from line 6.

**Reviewer #2: Shoji Sakiyama**

**Reviewer's report:**

*Minor Essential Revision*

#1. *Page 6 line 10; Please list the source of the TNM classification that you used.*

We thank the reviewer for this recommendation and agree that the used TNM classification requires clarification. In our article, we used the TNM classification by Koga and colleagues (Pathology International 1994), as well as the updated N stages by Bhora and coworkers (Journal of Thoracic Oncology 2014). The respective references (11, 12) were added in this section (page 6, line 20).

*Spelling mistake #2 Page 3 line 9; "exazerbation" is "exacerbation"?*

We corrected the spelling mistake as suggested.