Author’s response to reviews

Title: Hormone signaling via androgen receptor affects breast cancer and prostate cancer in a male patient: A case report

Authors:

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Author’s response to reviews:

3rd October, 2018

Dear Editor,

Please find enclosed the edited manuscript and Tables in Word format (file name: Revised Manuscript with Track Changes.doc).

Title: Hormone signaling via androgen receptor affects breast cancer and prostate cancer in a male patient: A case report

Author: Haruko Takuwa, Wakako Tsuji, Masayuki Shintaku, and Fumiaki Yotsumoto

Name of Journal: BMC Cancer

BCAN-D-18-00931

The manuscript has been improved according to the suggestions of editors:

Jocelyn Ceraline (Reviewer 1): The present Case Report entitled "Hormone signaling via androgen receptor affects breast cancer and prostate cancer in a male patient: A case report" is worth to be published. However, the authors should consider the possibility that the androgen receptor signalling could be altered during patient history, and consequently could affect the response to hormone therapies.

Some typing errors have been noticed through the manuscript.
RESPONSE;

Thank you for reading our report in detail.

After exposure to endocrine therapy, some mutation related with endocrine-resistance in cancer cells are detected by sequencing or molecular testing. The weakness of this study was that such testing was not performed for this patient. However, estrogen exposure after estrogen depletion might be effective strategy for ER-positive metastatic breast cancer in such situation with endocrine-resistance.

We added this in the manuscript (Discussion p.8-9).

Reviewer 2 (Reviewer 2): PEER REVIEWER COMMENTS: To view the full report from the academic peer reviewer, please see the attached file.

REVIEWER COMMENTS FROM REPORT: The authors reviewed the medical records of 1,431 patients with breast cancer at their institute and identified 8 males among patients, one of which had breast cancer and prostate cancer that is described in this manuscript. The manuscript provides detailed information on the clinical course of disease in this patient although no information on germline predisposing mutations is available. The co-occurrence of male breast cancer and prostate cancer is rare. However, several cases have been reported and large case series have been published on this topic including but not limited to PMID: 28946846 and PMID: 18504455. The novelty and contribution of this case report to the current literature is, therefore, not clear.

Thank you for your comments.

Endocrine therapy for both breast and prostate cancer is difficult to balance both diseases. This is because endocrine therapy for breast cancer and prostate cancer acts sometimes cooperatively, and sometimes against with conflicting mechanisms. Again, we would like to emphasize our case underwent estrogen exposure after estrogen depletion, and this strategy might be effective for ER- and AR-positive metastatic breast cancer patients.

We added this in the manuscript (Discussion p.9).

Thank you again for considering publication our manuscript in the BMC Cancer.

Sincerely yours,

Haruko Takuwa