Author's response to reviews

Title: Primary Extranodal Marginal Zone B-cell Lymphoma with Diffuse Uveal Involvement and Focal Infiltration of the Trabecular Meshwork: A Case Report and Review of Literature

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Author's response to reviews:

We have checked carefully and made the revision according to your instructions. Also, a native English speaking colleague helped to copyedit the paper. These changes are as follows:

1. We modified the first sentence in the abstract, which is “Primary extranodal marginal zone lymphoma (EMZL) of the uvea is a rare condition and the diagnosis may be challenging”. (Line 27-28)
2. We modified the spelling error from “findings” to “findings”. (Line 39)
3. We added the past medical history from 2010 to 2012. (Line 68-74)
4. We used 20/20 type terminology to report the visual acuity. (Line 75-76)
5. The patient refused further examination after being informed of possible complications. So we have to make susceptible diagnosis and give experimental treatment according to the present examinations. (Line 85-88)
6. The patient and his family refused to receive aggressive treatment, including biopsy. When he came back to our institute last time, visual acuity deteriorated to no light perception. We have to perform enucleation after obtaining informed consent from patient. (Line 90-98)
7. One confusing sentence was revised to “Most of these cases involved extraocular tissue, with only 10 cases having no extraocular extension”. (Line 133-134)
8. We modified “be resulted from” to “result from”. (Line 145)
9. Author’s affiliation was changed. (Line 7, Line 14, Line 213)
10. Choroidal involvement of EMZL can present various and nonspecific
features. The diagnosis is commonly delayed for its insidious onset and its ability to simulate other conditions. Loriaut et al. reported a series of choroidal and adnexal extranodal marginal zone B-cell lymphoma. In their 9 cases, the mean time to diagnosis was 12 months and the longest period for diagnosis delay was 24 months. This was consistent with our data. (Line 140-143)

Again, thank you very much for your excellent suggestions and comments. Please allow us to explain any outstanding points.