Author's response to reviews

Title: Clinical spectrum of intrathoracic Castleman disease: a retrospective analysis of 48 cases in a single Chinese hospital

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Author's response to reviews:

Dear professor Catia Cornacchia,

Thank you for your attention to our manuscript. This is the revised version of our article. I have re-edited my manuscript according to the Journal Editorial Office of BioMed Central: line and page numbers have been added to the main manuscript. And our manuscript is not involved in the “Deposition of data” and “Availability of Supporting Data section”. Thank you for your kind suggestions.

Thorax is the common place to develop Castleman disease (CD), but there is no systemic clinical analysis for intrathoracic CD. In order to facilitate the recognition, diagnosis, and treatment of this uncommon disease, we now describe the clinical and radiological characteristics of 48 intrathoracic CD patients in our hospital. Intrathoracic muticentric CD (MCD) was more common than unicentric CD (UCD) in our hospital. MCD was older, more symptomatic and sicker than UCD. Hyaline vascular variant were more common in UCD. All of UCD showed mass in various intrathoracic locations and surgery resection was performed for all and all were alive. Mass, pleural effusion, bronchiolitis obliterans and diffuse pulmonary shadows, including lymphocytic interstitial pneumonia-like images, multiple nodules of different size and sites, patchy, ground-glass opacities and consolidations were showed in our MCD. Most of MCD cases were arranged with chemotherapy and their prognosis were worse than UCD’s.

We believe this study will be of great interest to pulmonologist, hematologist as well as the general readership. This study has not been submitted elsewhere for publication consideration. All authors have read and agreed to this submission and declare no conflicts of interest. We hope this study is of sufficient novelty and
importance for publication as a research article in the BMC pulmonary medicine. Thank you for your consideration and I look forward to hearing from you.

Sincerely yours,

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