Author’s response to reviews

Title: Desmoid Tumours of the Extremity and Trunk. A retrospective Study of 44 Patients

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Author’s response to reviews:

Dear Editors,

Thank you very much for reviewing this manuscript once again.

As proposed by the reviewer we made the following corrections:

1. Please include the email addresses for all authors on the title page. The corresponding author should still be indicated. Please also ensure all email addresses provided in the manuscript and the submission system match.

All email addresses had been included on the title page.
2. In the Ethics and consent to participate section of the Declarations, please include the full name of the ethics committee (and the institute to which it belongs to) that approved the study and the committee’s reference number if appropriate. Please also confirm whether informed consent, written or verbal, was obtained from all participants and clearly state this. If verbal, please state the reason and whether the ethics committee approved this procedure. If the need for consent was waived by an IRB or is deemed unnecessary according to national regulations, please clearly state this, including the name of the IRB or a reference to the relevant legislation.

We added this to the Declaration on page 14 which read now:

Ethics approval and consent to participate

All procedures followed were in accordance with the ethical standards of our institution. It has been a long standing general policy of our University Hospital to obtain informed consent from all patients admitted for any potential future retrospective analysis of their clinical data. (Ethikkom-mission bei der Medizinischen Fakultät der LMU München; Pettenkoferstr. 8a, 80336 München.)

3. In the Authors’ contributions section, please specify in details all the contributions of all authors individually. Guidance and criteria for authorship can be found here:

http://www.biomedcentral.com/submissions/editorial-policies#authorship

Please also ensure to represent authors' names using their full initials, not their full name, in the Authors’ Contributions section.

On page 15 it reads now:

L.W.

Student doing here thesis on desmoid-type fibromatosis. She contacted the patients and acquired the data.
A.K.
Surgeon on many of the cases, involved in drafting and revising of the manuscript.

A.B.
Radiologist reviewing the radiologic investigations, involved in drafting and revising of the manuscript.

T.K.
Pathologist reviewing the pathologic investigations, involved in drafting and revising of the manuscript.

L.L.
Oncologist. None of the patients in the study received chemotherapy. But every patient was discussed in the interdisciplinary panel and the decision not to treat was based on this, involved in drafting and revising of the manuscript.

F.R.
Reviewing the radiotherapy and deciding which patient to treat or not to treat, involved in drafting and revising of the manuscript.

V.J.
Surgeon on many of the cases, reviewer of the manuscript, involved in drafting and revising of the manuscript.

H.R.D.
Corresponding author. Developed the study concept, did the final data analysis and provided the major clinical input in writing and revising of the manuscript.
Each author has contributed significantly to, and is willing to take public responsibility for this study: its design, data acquisition, and analysis and interpretation of data. All authors have been actively involved in the drafting and critical revision of the manuscript.

3. Please provide a list of all the abbreviations used in the manuscript. This list should be placed after the conclusions and just before the Declarations section. All abbreviations should still be defined in the text at first use.

We included the paragraph as follows:

Abbreviations

APC: Adenomatous polyposis coli; CI: Confidence interval; cm: Centimeter; CT: Computed Tomography; CTNNB1: Catenin (Cadherin-Associated Protein), Beta 1 gene; DF: Desmoid-type fibromatosis; ESNWG: European Sarcoma Network Working Group; f: Female; EORTC: European Organization for Research and Treatment of Cancer; FAP: Familial adenomatous polyposis; GI: Gastrointestinal; HR: Hazard ratio; LR: Local recurrence; m: Male; MRI: Magnetic resonance imaging; NSAIDs: Non-steroidal antiinflammatory drugs; R0, R1, R2: Resection margin; RTX: Radiotherapy; WHO: World Health Organization; y: Years