Author’s response to reviews

Title: Polypoid arteriovenous malformation of the ureter mimicking a fibroepithelial polyp, a case report.

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Author’s response to reviews:

Dear Marco Grande,

Thank you for reviewing our manuscript ‘Polypoid arteriovenous malformation of the ureter mimicking a fibroepithelial polyp’

Please find enclosed our revised manuscript.

We had a close look at the comments of the reviewer, please find our answers here.

Alessandro Calarco (Reviewer 2)

- At the very beginning of your paper you mention that 20% of the ureteral tumors are benign. Could you please send us the exact step of the paper that you mention who report these finding?

* These 20% refers to the second line of the introduction of our first reference. Bilateral ureteral fibroepithelial polyps and review of the literature. Tekdogan UY et al. Introduction section, page 98, line 2.

- During the initial study of the case you performed a retrograde pyelography but, didn't you performed any UroCt scan before? As we know haematuria is tumor based till you cannot demonstrate the contrary.
We did perform a CT scan; it is described in the case history section, page 4, 7th line. Abdominal-pelvic computed tomography revealed a thickened ureteral wall of the proximal part of the left ureter. Moreover, a presumed blood clot was observed in the ureter for which there was no suspicion of tumour.

- Don't you have any endoscopic image?

We do have endoscopic images; we have a movie of the endoscopy which we used for education. We attached is as supplementary material.

- You describe just the thulium laser ablation but maybe is better to also say that you made one or more biopsies than you can justify the histological description.

We first performed a ureteroscopy where an abnormality was seen that did not fit the image of a urothelial cell carcinoma, that is why we performed biopsies which demonstrated fibrosis. This is described in the case history section, page 4, line 10 and 11. Ureteroscopy showed a 3cm, firm polypoid-like lesion with a glistening appearance. A biopsy of this polypoid-like lesion demonstrated fibrosis.

- Could be better to explain what kind of follow up did you do (UroCt scan? cytology?)

We used indeed CT-IVP and cytology in the follow up. We added this to the last sentence of the case history, page 5, last line. ‘no recurrence was observed in the follow-up with abdominal-pelvic computed tomography and urine cytology during a period of eight years.’

- As the 4 cases described are all women, did you noticed an association with endometriosis?

We did not notice an association with endometriosis. Our patient was treated with in vitro fertilisation, but she did not have endometriosis.

Thank you for giving us the opportunity to revise our manuscript.

Kind regards,

On behalf of me and my co-writers,

Celine ten Donkelaar