Author’s response to reviews

Title: Penoscrotal edema: A case report and literature review

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Author’s response to reviews:

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Dear editor,

Thank you very much for your email and advice regarding our manuscript. We also thank the reviewer for their constructive comments and suggestions and have revised the manuscript accordingly. I would like to re-submit it for your further consideration for publication in BMC Urology. Our amendments are highlighted in red in the revised manuscript and our point-to-point responses are addressed below.

Thank you again and I hope that the revision is now acceptable and look forward to hearing from you soon.

Sincerely,
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Our responses to the reviewers’ comments:

Editor Comments:
1. Please change the Article Type to Case Report.
Response: We thank the editor for the helpful comments. The Article Type has been changed into Case Report.

2. Please select the Case Reports section for your manuscript when submitting the revised manuscript.
Response: We thank the editor for the helpful comments. The Article Type has been changed into Case Report.

3. Please amend the Abstract headings (both in Editorial Manager and the manuscript file) to: Background, Case Presentation, Conclusions.
Response: We thank the editor for the helpful comments. The Abstract headings have been amended in the revised manuscript.

4. Please include the email addresses for all authors on the title page. The corresponding author should still be indicated.
Response: We thank the editor for the helpful comments. The email addresses for all authors and corresponding author have been addressed on the title page in the revised manuscript.
5. Please move this statement: "Written informed consent was obtained from the patient and the legal guardian for publication of this Case Report and any accompanying images. A copy of the written consent is available for review by the Editor of this journal." from the Ethics approval and consent to participate section to the Consent for publication section.

Response: We thank the editor for the helpful comments. The amendment has been made in the revised manuscript.

6. Please amend the Availability of data and materials statement to "All data generated or analysed during this study are included in this published article".

Response: We thank the editor for the helpful comments. The amendment has been made in the revised manuscript.

7. Please amend the Competing Interests statement to "All of the authors declare that they have no competing interests".

Response: We thank the editor for the helpful comments. The amendment has been made in the revised manuscript.

8. We would like to ask for you to provide more justification for the contributions of TTL, DNC, YW, as currently they do not automatically qualify for authorship. Contribution to one aspect of the study, alone, does not usually justify authorship.

An 'author' is generally considered to be someone who has made substantive intellectual contributions to a published study. According to the ICMJE guidelines, to qualify as an author one should have:

a) made substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data; AND

b) been involved in drafting the manuscript or revising it critically for important intellectual content; AND

c) given final approval of the version to be published. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content; AND
d) agreed to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Anyone listed as an author must be included in this section. If you choose to change your author list you will need to fill out a change in authorship form and send it by email to the Editorial office to be approved by the Editor. The form can be found here: https://www.biomedcentral.com/getpublished/editorial-policies#authorship.

Anyone who contributed towards the article who does not meet the criteria for authorship can be acknowledged in the ‘Acknowledgements’ section.

Response: We thank the editor for the helpful comments. The contributions of TTL, DNC, and YW have been listed as follow. TTL, DNC, YW, as currently they do not automatically qualify for authorship. TTL: Statistical analysis, data acquisition, and manuscript editing. DNC: Data acquisition, and manuscript editing. YW: Conception and design, and manuscript editing. The amendment has been made in the revised manuscript.

9. Please include a statement in the Authors’ contributions section to the effect that all authors have read and approved the manuscript, and ensure that this is the case.

Response: We thank the editor for the helpful comments. The amendment has been made in the revised manuscript.

BMC Urology operates a policy of open peer review, which means that you will be able to see the names of the reviewers who provided the reports via the online peer review system. We encourage you to also view the reports there, via the action links on the left-hand side of the page, to see the names of the reviewers.

Reviewer reports:

Piotr Bryniarski (Reviewer 1): I read the paper entitled “Scrotal edema: A case report and literature review” by Tian Lin et al. with great interest and find this study important for urologists as scrotal oedema is quite rare and demanding entity. I have several minor concerns which I would like to share with authors.

Response: We thank the reviewer for the positive remark.
1. Authors wrote that scrotal neck is most suitable source of reconstruction with flaps, however very often the whole scrotum is involved and require excision. I would recommend the authors to write that other skin parts may be of use like posterior scrotal flaps, superiorly based flap of the pubic area for testicular coverage, and split-skin graft to the penis.

Response: We fully understand and agree with the reviewer’s concern. The amendment has been made in the revised version.

2. Authors wrote: "Lower limb lymphoscintigraphy confirmed the presence of slow lymphatic reflux in the lower extremities and both the inguinal and iliac lymph nodes" - I would like the authors to focus on this issue. I understand that there has to be a lymph vessel rupture due to the presence of lymphangioma where lymph spreads into surrounding structures causing oedema. I would recommend to add scans of lymphoscintigraphy showing lymphatic leakage and dermal backflow. The other question is the reflux to iliac lymph nodes - as I understand correctly lymphangiomas must be even higher than iliac lymph nodes to cause reflux there. As abovementioned scan of lymphoscintigraphy with description would significantly enriched the paper.

Response: We fully understand and agree with the reviewer’s concern. The sentence "Lower limb lymphoscintigraphy confirmed the presence of slow lymphatic reflux in the lower extremities and both the inguinal and iliac lymph nodes" should be revised as “The results of lower limb lymphoscintigraphy demonstrated that the lymphatic drainage of the lower extremities was obviously tardy. The development of bilateral inguinal and iliac lymph nodes was obviously tardy.” The lower limbs and anterior pelvic position was imaged after injecting with the tracer (99mTc-SC) subcutaneously between the first and second toes. The images demonstrated that the lymphatic drainage in both lower extremities were unclear. In the early stage, the images showed that the bilateral inguinal and iliac lymph nodes were blurred, which was obvious on the left side. The concentration of imaging agent (99mTc-SC) in the bilateral inguinal and iliac lymph nodes was gradually increased within 6 hours after imaging. There was no significant concentration of imaging agent (99mTc-SC) on the skin of the scrotum during the entire process. The lymphoscintigraphy with more specific description has been added in the revised version.

3. The authors wrote: "The affected skin and subcutaneous tissues were excised followed by a split-thickness graft to the penis and scrotum" However I cannot see split-thickness grafts in figures. Instead I can see flaps cut in the middle in Y shape. Please indicate with arrows where the grafts were positioned and what was the source of grafts.
Response: We fully understand and agree with the reviewer’s concern. The source of grafts was as you stated that the flaps was cut in the middle in Y shape to cover the penis and scrotum. No split-thickness graft to the penis and scrotum was used in this study. We has revised this sentence in the revised manuscript.

4. The authors wrote: "satisfactory sexual (?) and penile function". In 15-year old boy I would recommend to say satisfactory erectile function.

Response: We fully understand and agree with the reviewer’s concern. The amendment has been made in the revised version.

Reviewer 2 (Reviewer 2): PEER REVIEWER ASSESSMENTS:

OBJECTIVE - Full research articles: is there a clear objective that addresses a testable research question(s) (brief or other article types: is there a clear objective)?

Yes - there is a clear objective

Response: We thank the reviewer for the positive remark.

DESIGN - Is the current approach (including controls and analysis protocols) appropriate for the objective?

No - there are minor issues

Response: We fully understand and agree with the reviewer’s concern. The amendment has been made in the revised version.

EXECUTION - Are the experiments and analyses performed with technical rigor to allow confidence in the results?

Yes - experiments and analyses were performed appropriately

Response: We thank the reviewer for the positive remark.
INTERPRETATION - Is the current interpretation/discussion of the results reasonable and not overstated?

Yes - the author's interpretation is reasonable

Response: We thank the reviewer for the positive remark.

OVERALL MANUSCRIPT POTENTIAL - Could an appropriately REVISED version of this work represent a technically sound contribution?

Probably - with minor revisions

Response: We fully understand and agree with the reviewer’s concern. The amendment has been made in the revised version.

PEER REVIEWER COMMENTS:

GENERAL COMMENTS: Written well and organized. But it does not provide any new insight on the topic.

Response: We thank the reviewer for the positive remark. We also fully understand and agree with the reviewer’s concern.

The article is well-written and has some good pictures. Its basically a good presentation of a familiar topic.

Response: We thank the reviewer for the positive remark.

This topic has been extensively published though, so this article does not provide any new insight. Change the title to 'Penoscrotal edema' rather than scrotal edema.

Response: We fully understand and agree with the reviewer’s concern. The amendment has been made in the revised version.