Author’s response to reviews

Title: Post-radical prostatectomy urinary incontinence: is there any discrepancy between medical reports and patients’ perceptions?

Authors:

Rafael Borges (rafa_cborges@hotmail.com)
Marcos Tobias-Machado (mtobias@hotmail.com)
Estefânia Gabriotti (te_ng@terra.com)
Francisco dos Santos Figueiredo (wfigueiredo@hotmail.com)
Carlos Bezerra (bezerrac@uol.com.br)
Sidney Glina (glinas@uol.com.br)

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Author’s response to reviews:

Rafael Castilho Borges
Faculdade de Medicina do ABC
No. 2000, Avenue Lauro Gomes, Santo André 09051-040, Brazil
rafa_cborges@hotmail.com

Dr Enrico Finazzi Agro
Editor-in-chief
BMC Urology
bmcurol.biomedcentral.com

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Subject: Revision and resubmission of manuscript BURO-D-19-00022R1
Dear Dr Agro,

Thank you for your letter and the opportunity to revise our paper on ‘Post-radical prostatectomy urinary incontinence: is there any discrepancy between medical reports and patients’ perceptions?’ We are grateful to the editors and reviewers for their time and constructive comments on our manuscript. The suggestions offered by the reviewers have been immensely helpful and we have implemented their comments and suggestions and wish to submit a revised version of the manuscript for further consideration in the journal.

I have included the reviewer comments immediately after this letter and responded to them individually, indicating exactly how we addressed each concern or problem and describing the changes we have made. The revisions have been approved by all six authors and I have again been chosen as the corresponding author.

Reviewer 1

1. Thank you for reminding us this important information. We have added it: all procedures were non-nerve sparing. (Methods section, line 7, page 4)

2. We have added the year of phone calls and mean time from operation. (Results section, line 2, page 8)

3. This is really paramount, so we reviewed medical records, including physical records to get access to this information and compare with patients’ reports. (Results section, line 8, page 8)

4. Prostate cancer risk classes were assessed through D’Amico Risk Classification and we have added it as you suggested (Methods section, line 13, page 4)

5. Incontinent patients underwent a pelvic floor muscle training and this information was then included (Results section, line 27, page 5)

6. We have data regarding patients’ report of continence status in last visit and in the moment of the last phone call. We did not have reported the continence rate in this last moment, so we really appreciate your suggestion. (Results section, line 1, page 8)

7. We reviewed physical records and we got access to ICIQ-SF applied at physicians’ visit, in such a way that we could compare these data with those obtained through application of ICIQ-SF by phone calls. It was possible to demonstrate a change in incontinence’s
profile (worsening of profile) despite the reduction of incontinence rate between periods and compare with literature data. (Results section, line 4, page 8)

8. Thank you so much for catching this error, which we have now corrected. (Results section, line 2, page 6)

Reviewer 2

Thank you so much for your assessment. We have changed information about results presented in methods section to the results section and we detailed inclusion (Methods section, line 8, page 4) and exclusion criteria (Methods section, line 17, page 4). We also included the number of patients who underwent radical prostatectomy in our institution during the period of study (Results section, line 16, page 5), including those with missing data and we those we could not contact over phone (Results section, line 21, page 5). We really appreciate you reminded us the length time bias, an important bias of our study and we have added it to discussion section (Discussion section, line 29, page 13). We also discussed the discrepancy between patients’ impression on continence and questionnaire results, comparing with some information available in literature (Discussion section, line 16, page 11).