**Author’s response to reviews**

**Title:** Relationship Between Plasma Atherogenic Index and Final Pathology of Bosniak III-IV Renal Masses: A Retrospective, Single-Center Study

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**Author’s response to reviews:**

Dear Editor,

Thank you for your kind consideration.

The corrections have been made according to suggestions of the reviewers.

Sincerely,

1 - Reviewer 2 (Reviewer 1)

Dear Ardalan Ahmad,

First of all thank you for your consideration and kind suggestions.

- According to your suggestion, we deleted "(range, 33 to 84)" in the abstract and in the Result section, Line 6, page 11, too.

- In the Methods section, Line 36, page 9, we correct ‘criterion’.

- In text and table 1&2, we reported non-parametric continuous variables as median with interquartile range as you offered. We highlighted all of them in the text and table 1&2. Thank
you for warning us about this basic and important statistical information. In Result section, Line 11, page 11, we changed the sentence "The mean PAI was 0.58±0.26 (range, 0.15 to 1.58) " to " The median value of PAI was 0.53 (0.15 – 1.58) " In addition, we made Mann-Whitney U test analysis for non-parametric continuous variables. As you can see in Table 2 footnote, we changed the superscripts of statistical methods.

We have already reported parametric continuous variables as mean with standard deviation, so we did not do any correction for them.

2 - (Reviewer 2)

Dear Kasonde Bowa,

First of all thank you for your consideration and kind suggestions.

- According to your suggestion we have changed the title, the new title include the study type and site. The new title as follows: Relationship Between Plasma Atherogenic Index and Final Pathology of Bosniak III-IV Renal Masses: A Retrospective, Single-Center Study

- According to your suggestion, In Abstract section, Line 19, page 6 & In Background section, Line 11, page 9 we changed the term “the predictive value of PAI” to “determine the accuracy of PAI in determining renal malignancy”. As you offered this term is more suitable for our research intention. After revision, the new sentences are as follows:

“In this study, we aimed to determine the accuracy of PAI in determining renal malignancy in localized renal masses preoperatively.”

- In the Methods section, Line 19-24, page 9, we changed the beginning of the first sentence. As you offered we presented case definition first and then we mentioned institutional Ethics Committee approval. After revision, the new paragraph is as follows:

“We retrospectively reviewed the medical records of patients with renal mass who underwent partial or radical nephrectomy in our hospital between the years 2013 and 2018. Approval was obtained from the institutional Ethics Committee.”

- In the Methods section, Line 24-31, page 9, we reversed the places of exclusion & inclusion criteria. As you offered we mentioned inclusion criteria firstly. After revision, the new paragraph is as follows:

“Patients were selected based on the existence of Bosniak III or IV lesions as evidenced by imaging modalities. Patients with incomplete data for lipid profiles before the operation, missing pre-operative diagnostic images, and those who were already on lipid-lowering agents, such as statin and fenofibrate, were excluded from the study. Metabolic syndrome was not considered an exclusion criterion.”
As you said, a prospective study would be better than retrospective study about this subject. Unfortunately, we designed this project last year and the patients have already operated. As we mentioned in the manuscript, period of the study between the years 2013 to 2018. In addition, we have already mentioned about this situation in the limitation section.

In fact, there were only one radiologist and one pathologist who were reported the results of the radiologic imaging and pathological specimens when we submitted our manuscript to the Journal, BMC Urology. As you know, we have taken a revision request for our study. Two of the subjects were about consultant pathologists & radiologist in the review report. According to these review, we requested to evaluate the radiologic imaging findings and pathologic specimens’ one more radiologist & pathologist. Unfortunately, there is only two experienced uropathologists in our hospital. Therefore, we could not reach three pathologists to evaluate our results. Our revision period was longer because of this re-evaluation process.

In our hospital, we always request a written informed consent from all patients who have malignancies; the reason of this approach is for a possible future scientific research. Therefore, we had already received informed consent before this study. Nevertheless, as you said it seems a bit unusual for a retrospective study. If you offer, we can delete this sentence. Also we prefer to delete this sentence, because it may be cause misunderstanding.

We emphasized the small sample size in both discussion and limitation sections.

Kind regards,

Dr. Nejdet Karsiyakali

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