Author’s response to reviews

Title: Follicular dendritic cell sarcoma (FDCS) of urinary bladder with coexisting urothelial carcinoma - A case report

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Dear Editor:

We appreciate the valuable comments by the Reviewers and have now tried to follow their advice. We have responded point to point to all queries, and hope that the manuscript now can be accepted for publication in BMC Urology.

With kind regards

Yours sincerely

Lianghong Teng
Response to the Reviewers

For all manuscripts that include details relating to an individual person (including case report), WRITTEN informed consent for the publication of these details must be obtained from that person (or their parent or legal guardian in the case of children under 18). Please provide the Consent for Publication as the following format if you have obtained the Consent for Publication in written form.

“Written informed consent was obtained from the participants for publication of this article and any accompanying tables/images. A copy of the written consent is available for review by the Editor of this journal.”

Response: We updated the description of Consent for Publication in the paper. It has been highlighted yellow.

Reviewer 1

The authors describe an extremely rare case of FDCS in Urinary bladder, associated with Transitional cell carcinoma. The case deserves to be published after major revisions:

1. English writing needs to be ameliorated

Response: Thank you for your comment. English language has been improved and also been revised by a native speaker of English. Our modified section has been highlighted yellow in the manuscript.

2. References must be updated: i.e. Update of WHO Classification, 2017; Saygin et al, 2013; Facchetti et al 2017 and discussion accordingly updated

Response: Thank you for your comment. We have updated our reference.


3. Histological images of FDCS are convincing, less clear those of TCC, higher power image/s of TCC is/are suggested.

Response: We are grateful for the comment. The high power image and description of urothelial carcinoma have been added in the paper.
The tumor cells of UC are arranged in nest or cord pattern, the cytoplasm was acidophilic and the nuclear were irregular. (Fig. 2E, F). Using immunohischemistry, UC were positive for CK, CK20, P63, GATA-3, negative for CD21, CD23, CD35 and D2-40. Otherwise, FDCS were positive for Vimentin, CD21, CD23, CD35 and D2-40, negative for CK and CK20. (Fig. 2G).

4. Supplementary Material is not publishable in the present form.

Response: Thank you for your comment. We have updated our figures to .jpg and .eps files.

Reviewer 2

RELEVANCE - Does this case report make a contribution to medical knowledge, have educational value, or highlight the need for a change in clinical practice or diagnostic/prognostic approaches?

Yes, this report contributes to medical knowledge

CASE DESCRIPTION - Are the details of the case sufficiently well described to understand the patient's symptoms and course of treatment?

Yes, the description of the case is sufficient

DIAGNOSIS/INTERPRETATION - Based on the facts presented, are the diagnosis, interpretation, and course of treatment medically sound?

Yes, the work described is medically sound

DISCUSSION OF THE CASE - Does the discussion appropriately analyse the importance of the findings and their relevance to future understanding of disease processes, diagnosis or treatment? Has an adequate literature review pertinent to the case been included?

Yes, the case is discussed fully in the context of the literature

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

Yes, this case report is suitable for publication

PEER REVIEWER COMMENTS:

GENERAL COMMENTS: This is a well done case report and I can find no major revisions that are needed.
REQUESTED REVISIONS:

One small revision. Page 5, line 4 should read Untill not Till.

Response: Thank you for your comment. We update our description in our paper.

The etiology of FDCS is not clear.