Author’s response to reviews

Title: A predictive model of thyroid malignancy using clinical, biochemical and sonographic parameters for patients in a multi-center setting

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Author’s response to reviews:

Dear Editor:

We are resubmitting our revised manuscript, BEND-D-17-00078, entitled, “A predictive model of thyroid malignancy using clinical, biochemical and sonographic parameters for patients in a multi-center setting”, for consideration for publication in BMC Endocrine Disorders as an Original Article.

We greatly appreciated the professional and valuable comments from the editor and reviewer. These suggestions helped improve the present manuscript and more importantly favorably contributed to our future research. Thank you very much for giving us the chance to modify the manuscript and make it more suitable for publication in BMC Endocrine Disorders, which is one of the most influential endocrine journals in the world.
All comments were carefully addressed point by point, and all sections of the manuscript in which changes were made in response to the comments were highlighted. The revised version of the manuscript was modified in accordance with the Instructions to Authors provided by BMC Endocrine Disorders and was re-edited by a native English speaker with a biomedical background from American Journal Experts. All authors have read the current manuscript and approved its submission. The authors declare no conflicts of interest.

Thanks again for your consideration for publication of the manuscript, and we look forward to hearing from you soon.

Respectfully,

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Point-by-point Responses to the Reviewers

We first thank you for carefully and patiently reviewing our manuscript and for providing constructive comments and suggestions, which helped improve our manuscript. Specific responses to the comments from the reviewer are as follows:
Reviewer:

Comments1: In my view, both the abstract and methodology section should explicitly refer to the fact that the patients were treated in a time or place that did not use nodule cytology in pre-operative assessment as this is in marked contrast to contemporary practice.

Response: Thank you for the suggestions. Due to the word limitation of abstract, does the reviewer think it is acceptable to refer to the fact that FNA was not generally performed when the study was conducted in Materials and Methods part? We added “FNA cytology was not generally performed and considered as a routine pre-operative assessment when the study was conducted” in Materials and Methods (Page 7, line 9).

Comments2: In addition, if the nodules were mostly detected during a routine medical examination, in asymptomatic patients, then this too must be explicitly stated in the methodology section. Presumably, the medical examination included a neck ultrasound as many of the nodules are less than 2cm and would not have been apparent on physical examination in most patients. This should be clearly stated in the text since the natural history of screen-detected nodules, as opposed to nodules detected by the patient, is not clearly known.

Response: Thank you for the suggestions. For clarification, we stated that “We retrospectively studied the data from 3145 consecutive patients who mostly received routine neck ultrasound detections and underwent total or partial thyroid surgery between 2006 and 2009 at four tertiary hospitals in China” in Materials and methods part (Page 6, line 6).

Comments3: If the nodule size is derived from ultrasound then this should be clearly stated in the text and table legends.

Response: Thank you for the suggestions. As suggested, we stated that “The following US parameters of the nodules were recorded: (1) number of nodules, (2) nodule size, (3) echoic texture, (4) echogenicity, (5) shape, (6) margin, (7) calcification (microcalcification, macrocalcification, or egg-shell calcification) and (8) intranodular central flow” in Materials and Methods part (Page 6, line 19). Additionally, we added “Nodule size was derived from ultrasound detection” in Table 1 legend.

Comments4: Page 12, line 21: "increased risk for malignancy in the microcarcinomas" - the word "microcarcinomas" should be replaced with "nodules less than 1cm in diameter"

Response: Thank you for the suggestion. Did the reviewer refer to "increased risk for malignancy in the microcarcinomas" in Page9 line 25 instead of Page12 line 21? We didn’t track "increased
risk for malignancy in the microcarcinomas" in Page12 line 21. We have replaced the word “microcarcinomas” with “nodules less than 1cm in diameter” in Page10, line 1.