Reviewer's report

Title: Testicular cancer in men with Down syndrome

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Reviewer: Irene Tuffrey-Wijne

Reviewer's report:

First of all, I would like to congratulate the authors on a well-written paper covering an important topic. I found the manuscript interesting and informative. The issues that arise when people with Down syndrome develop cancer need attention and focus. In my view, this paper contributes to this. However, there are a few issues that need to be addressed by the authors, as follows.

1. MAJOR COMPULSORY REVISIONS
   (a) My main problem with this manuscript is the lack of clarity about its aim, focus and methods. The only indication is the sentence at the end of the introduction: "We review the clinical challenges in treating this group of patients and how individual needs can be supported in order to deliver the best care."

   This is clearly not an original research paper; nor is it a systematic review of the literature. The authors need to be much clearer about the aim and scope of the paper. HOW did they review the issues? Is this a discussion paper based on the available literature (albeit not systematically reviewed), or on their own clinical experience? (they do refer to their own experience throughout the paper, so it would help to have a brief description of the authors' expertise). How were the topic areas within the paper selected? ("Incidence and aetiology", "presentation"; "communication..." etc). They all seem relevant to me, but some description of what the reader is to expect would be important, perhaps along the lines of "We describe the incidence/presentation/etc, followed by some common issues reported in the literature (communication/psychological distress/survivorship/etc); we also address the specific treatment considerations for testicular cancer in men with Down syndrome." The latter ("Treatment", "Seminoma", NSGCTs") forms a significant part of the paper, and may even be the main part of it. The authors need to be clear about this, and perhaps the different sections more distinctly.

   (b) It is also important that the authors include the aim, scope and methods of the paper in the title and abstract. Currently, on assessing the title and abstract, it wasn't clear to me whether this was a research paper, a discussion paper, a literature review or otherwise.

   NB I lack the clinical expertise to assess the "treatment" sections of the manuscript, but found it interesting and well written.

2. MINOR ESSENTIAL REVISIONS
(a) Consistency needed in terminology. The authors use "learning disability" and "learning difficulty", seemingly interchangeably. I suggest that the current acceptable terminology in the context of a paper like this in the UK is "learning disability"; for an international audience, it is better to use the term "intellectual disabilities", as in some countries the term "learning disability" causes confusion.

(b) Last paragraph of "Communication, informed consent and patient centred decision-making" section: "...central to almost all failings is often the lack of value placed on someone's life with learning disability." This is, in my view, too sweeping a statement that is difficult to back up with hard evidence. There have been a number of other contributing factors identified in recent studies, including, for example, a lack of staff understanding of learning disability and of the Mental Capacity Act in the UK, and the 'invisibility' of people with learning disabilities within healthcare systems and subsequent lack of reasonable adjustments (see for example our own report on patient safety of people with learning disabilities in hospitals: http://www.journalslibrary.nihr.ac.uk/hsdr/volume-1/issue-13#abstract; and the CIPOLD report: http://www.bristol.ac.uk/media-library/sites/cipold/migrated/documents/fullfinalreport.pdf)

(c) In the conclusion, please clarify the sentence "Guidelines are in place to ensure best practice is maintained" as these guidelines have not been described in the text.

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare I have no competing interests