Author's response to reviews

Title: Molecular Diagnosis and Comprehensive Treatment of Multiple Endocrine Neoplasia Type 2 in Southeastern Chinese

Authors:

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Cover Letter

To:

Editor-in-chief

Hereditary Cancer in Clinical Practice

Dear editors,

Thank you very much for your email of 13 August 2014 to introduce your journal. Congratulations on your journal’s new and increased impact factor. Now, I am pleased to send our manuscript “Molecular Diagnosis and Comprehensive Treatment of Multiple Endocrine Neoplasia Type 2 in Southeastern Chinese” as an “Research Article” that may be of interest for perspectives on multiple endocrine neoplasia type 2 (MEN 2), a familial hereditary disease normally caused by RET mutations. In the present study, we aimed to determine the efficacy of clinically managing MEN 2-related medullary thyroid carcinoma (MTC) and pheochromocytoma (PHEO) based on systemic family screening and RET testing. RET mutations were confirmed in 20 symptomatic patients and identified in 13 at-risk relatives (RET carriers). Twenty-six of 33 MEN2 patients underwent thyroidectomies with neck dissections; the mean age at the time of the first thyroid surgery and the tumor diameter of the 6 RET carriers was decreased compared with 20 symptomatic patients ($P < 0.001$ and $P = 0.007$, respectively), while the disease-free survival was increased (80% vs.10%, $P=0.0001$). Seven RET carriers who were declined surgery. One of 20 symptomatic patients with medullary thyroid cancer (MTC) bone metastases after surgery received vandetanib therapy for 20 months and responded well. Additionally, 8 of 24 MEN2A patients who initially had unilateral
pheochromocytomas underwent cortical-sparing adrenalectomy (CSA), 1 developed contralateral pheochromocytomas 10 years later, then also accepted and also agreed to a CSA. None of the patients required steroid replacement therapy. Based on our results, integrated RET screening and the pre-operative calcitonin level is an excellent strategy to ensure earlier diagnosis and standard thyroidectomy. CSA can be utilized to preserve adrenocortical function in patients with pheochromocytomas.

We state here that the manuscript is original and has not been submitted elsewhere. The authors declare that they have no competing financial or other interests. The manuscript has been read and approved by all the authors; the requirements for authorship have been met and each author believes that the manuscript represents honest work. We would be happy if the manuscript will be evaluated by your Editorial Board members for publication in *Hereditary Cancer in Clinical Practice*.

Thank you for your kind cooperation with this matter in advance.

As potential reviewers we suggest,

**Michael Brauckhoff,**

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With best regards,

Sincerely yours,

Xiao-Ping Qi

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