Author's response to reviews

Title: Misdiagnosis of inclusion body myositis: two case reports and a retrospective chart review.

Authors:

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Author's response to reviews: see over
June 28th, 2015

Dear Journal of Medical Case Reports Editorial Office,

Please accept our apologies for the delay in our response and kindly extending the deadline to July 1st, 2015. We never received the original email from the editorial office that the reviews were completed. We now respectfully submit our rebuttal letter regarding our manuscript “Misdiagnosis of inclusion body myositis: two case reports and a retrospective chart review.” We express our gratitude to both of the reviewers for their insightful and helpful comments. Below are our responses in italics, and revisions within the revised manuscript have been highlighted in red font:

Reviewer: Josep M. M. Grau

20 patients received the diagnosis of sIBM in 10 years. How many patients are seen in the Unit in a standard year?

Our university neuromuscular department sees approximately six new cases of s-IBM per year. This information has now been added to the revised manuscript.

Does the case represent a useful contribution to the medical literature?: Although it is known that the diagnosis of sIBM sometimes emerge from an erroneous PM diagnosis, not everybody is familial with such a circumstance.

Thank you for this comment. We absolutely agree and with our manuscript hope to educate other physicians regarding this.

Additional comments to authors?: Try to shorten either the manuscript as well as the table.

Thank you for this comment. We have shortened both the manuscript and the table but as the same time retained the essential information. The manuscript has been substantially edited to provide a better flow of information along with the table.

Level of interest: An article of importance in its field

Thank you. We agree.

Reviewer: Bernhard Schaller

Comments to authors:

The authors present an interesting and clinically important case-series about inclusion-body myositis. However, the manuscript needs more structure and some further adjustments before it can be accepted for publication: I would suggest to present the manuscript as case series with 2 examplary cases. Please included therefore two cases into your table. Please replace range by standard deviation and present it
as usually known. The reported results of this table should be extended. The relatively lose enumeration of the misdiagnosis should be summarized and structured. The authors should recognize here the pattern of their results and report it! The discussion is somewhat superficial and full of "text book knowledge". The authors should discuss here their own results with the literature. A limitation of the study should be included in this discussion.

Thank you for your comments. We have given more structure and further adjustments in the revised manuscript with a focus on two cases as illustrations. Both of the example cases are included and highlighted within the table and we now present the range of months until final and correct diagnosis as standard deviations for each case as suggested. We also extend the results of the table and provide a revised summary and structure regarding enumeration of the misdiagnosed cases. Please be aware that the other reviewer suggested that we shorten the table, so we strove to obtain a balance by providing an explanatory statement recognizing the pattern of our results in the discussion section. Additionally, we have edited the discussion section and now discuss our results in light of the existing literature, including our clinical neuromuscular findings and NCS/EMG findings in our neurophysiology laboratory in our series of patients at our center. We also now provide limitations of our study.

In our revised manuscript, we acknowledge the assistance of Jennifer Kelly Shepphird, PhD of JKS Science & Medical Writing, LLC for her assistance in production and revision of the manuscript table, calculating the standard deviation and other statistics, and editing the overall manuscript to shorten it and improve the structure and flow.

We also have corrected some minor grammatical errors.

We once again extend our gratitude to both of the reviewers for their time and also to the editorial office.

Sincerely yours,

Richard A. Rison, M.D.