Author's response to reviews

Title: Urolithiasis in ileal continent urinary reservoir - the first description of analgesia-free flexible ureteroscopic treatment and laser lithotripsy via a ureteral access sheath for removal of a large urinary stone: a case report

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Author's response to reviews: see over
Dear Prof. Kidd,

Thank you very much for the opportunity to revise our manuscript. The comments of the reviewers have been particularly helpful to us to further improve the quality of the manuscript. Please find enclosed our answers to the reviewers’ comments. The revised manuscript files will be uploaded as indicated in the guidelines of your journal.

Sincerely

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Answers to the the reviewers:

Referee 1:
Just couldn't understand the following line. Might need to rephrase it. "After the initial reconstructive surgeries, > 20 abdominal following interventions were needed due to stoma incontinence, prolapse, adhesions and reservoir fistula. The last procedure was performed in 2012 due to via falsa formation within the Monti-segment (MS)."

Thank you for your pleasant review.
We have rephrased this to: "After initial surgical extrophy treatment including urinary diversion, > 20 additional abdominal interventions were needed due to stoma incontinence, prolapse, adhesions and reservoir fistula. The last procedure was performed in 2012 due to via falsa formation within the Monti-segment (MS)."

Referee 2:
Authors claim that this is the first time such a procedure is done is not ethical. It might be first reported case in which all the modifications to reduce
invasiveness was used together. Several authors have reported transstomal endoscopic procedures for stone removal with varying modifications.

Thank you for this comment. We agree that other authors have reported transstomal endoscopic procedures for stone removal and discuss this in the manuscript. No description of the particular combination of techniques that we used could be found in the literature. Since we cannot be sure whether other groups have used the described technique earlier, we changed the title to: “Urolithiasis in ileal continent urinary reservoir – the first description of analgesia-free flexible ureteroscopic treatment and laser lithotripsy via a ureteral access sheath for removal of a large urinary stone: a case report”. In the rest of the manuscript we already did use the term “first description” instead of “first case”.

Authors report that continence was maintained at 3 months, but do not report if there was any incontinence immediately after the procedure.

Thank you for this valuable comment. We have changed the sentence to: “She reported full continence and no catheterization problems directly after the procedure and at follow-up 3 months later.”

This case report is has well written introduction, discussion and conclusion. But case presentations needs revision to improve clarity. (for example 4th sentence could be revised to read as follows. Last surgical intervention was in 2012 for a false passage within the Monti segment.)

We made the following changes to the case presentation:
"After initial surgical extrophy treatment including urinary diversion, > 20 additional abdominal interventions were needed due to stoma incontinence, prolapse, adhesions and reservoir fistula. The last procedure was performed in 2012 due to via falsa formation within the Monti-segment (MS)."

Several authors have reported on the safety of transstomal endourological management of reservoir calculi.

Please include the following reference

We have added the suggested reference.