Author’s response to reviews

Title: Mondor’s Disease - A rare cause for chest pain: A case report

Authors:

Navaneethakrishnan Sugathan (drn.sugathan@yahoo.com)
Vithiya Ratnasamy (rvithiya06fm74@gmail.com)

Version: 1 Date: 25 Nov 2017

Author’s response to reviews:

Reviewer reports:

Reviewer #1: 1. Do you believe the case report is authentic?
   Yes

2. Do you have any ethical concerns? Please consider if local Institutional Review Board approval or ethical approval was obtained (if appropriate) and if the patient (or their parent or guardian in the case of children under 18) gave written, informed consent to publish this case and any accompanying images. A statement to this effect should appear in the manuscript.

   Comments: Ethical approval is not applicable. Patient gave informed written consent to publish this report.

3. Does the Introduction explain the relevance of the case to the medical literature?
   Yes
4. Does the article report the following information? Where information is missing, please specify.

a. The relevant patient information, including:

- De-identified demographic information (age, gender, ethnicity)
- Main symptoms of the patient
- Medical, family and psychosocial history
- Relevant past interventions and their outcomes

Author response: I have included all relevant above details in the revised version.

b. The relevant physical examination findings

Author- Included in details appropriate for this case

c. Important dates and times in this case (if appropriate, organized as a timeline via a figure or table); if specific dates could lead to patient identification, consider including time relevant to initial presentation, i.e. initial presentation at T = 0, follow up at T = 1 month.

Author- Included appropriately.

d. Diagnostic assessments, including:

- Diagnostic methods
- Challenges (e.g., financial, language/cultural)
- Reasoning and prognostic characteristics (e.g., staging), where applicable

Author- Included. There were no financial, cultural or language issue. Staging - not applicable
e. Types and mechanism of intervention

Author- It is there

f. A summary of the clinical course of all follow-up visits

Comments: Included.

5. Is the interpretation (discussion and conclusion) well balanced and supported by the case presented?

Comments: Yes

6. Is the anonymity of the patient protected? Please consider any identifying information in images such as facial features or nametags, whether the patient is named etc. If not, please detail below.

Yes

7. Is the Abstract representative of the case presented?

Comments: Yes

8. Does the case represent a useful contribution to the medical literature?

Comments: Yes, as it is a rare disease, reporting of this condition is essential and it will help to write a review article (Systematic review)
Reviewer #2: 1. Do you believe the case report is authentic?
Yes

2. Do you have any ethical concerns? Please consider if local Institutional Review Board approval or ethical approval was obtained (if appropriate) and if the patient (or their parent or guardian in the case of children under 18) gave written, informed consent to publish this case and any accompanying images. A statement to this effect should appear in the manuscript.

Comments: Ethical approval is not applicable. Patient gave informed written consent to publish this report.

3. Does the Introduction explain the relevance of the case to the medical literature?
Yes

4. Does the article report the following information? Where information is missing, please specify.

a. The relevant patient information, including:
   - De-identified demographic information (age, gender, ethnicity)
   - Main symptoms of the patient
   - Medical, family and psychosocial history
   - Relevant past interventions and their outcomes
Author response: I have included all relevant above details in the revised version.

b. The relevant physical examination findings

Author- Included in details appropriate for this case

c. Important dates and times in this case (if appropriate, organized as a timeline via a figure or table); if specific dates could lead to patient identification, consider including time relevant to initial presentation, i.e. initial presentation at T = 0, follow up at T = 1 month.

Author- Included appropriately.

d. Diagnostic assessments, including:
   - Diagnostic methods
   - Challenges (e.g., financial, language/cultural)
   - Reasoning and prognostic characteristics (e.g., staging), where applicable

Author- Included. There were no financial,cultural or language issue. Staging - not applicable

e. Types and mechanism of intervention

Author- It is there

f. A summary of the clinical course of all follow-up visits

Comments: Included
5. Is the interpretation (discussion and conclusion) well balanced and supported by the case presented?

Comments: Yes

6. Is the anonymity of the patient protected? Please consider any identifying information in images such as facial features or nametags, whether the patient is named etc. If not, please detail below.

Yes

7. Is the Abstract representative of the case presented?

Comments: Yes

8. Does the case represent a useful contribution to the medical literature?

Comments: Comments: Yes, as it is a rare disease, reporting of this condition is essential and it will help to write a review article (Systematic review)

9. Additional comments for the author(s)? The conclusion that Mondors disease should be considered in the differential diagnosis of chest pain in the emergency setting is over teachings and the implications stemming from it are far from acceptable. Furthermore, I do not believe that this case report adds anything novel to the existing literature. A review of the etiopathogenesis and prognostic factors could add to the effort, I do not think that the effort is worthy of publication in its present form.

Author- I have rewritten with more details, As you advised, i have included pathophysiology and prognosis.
Reviewer #3: Greeting

Thanks for allowing me to review this case report

1. The background was needs to be enriched more to make more interesting.

2. Case presentation was deficient.

3. Please read more case report then rewrite your case report

Wish you the best for in the future.

Regards

Author: According to your guide, i have rewritten this case with more essential information.