Author’s response to reviews

Title: The Oral Manifestations of Syphilitic Disease: A Case Report

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Author’s response to reviews:

Thank you for your time and consideration of our manuscript entitled “The Oral Manifestations of Syphilitic Disease: A Case Report”. I have submitted a revised version of the manuscript to Journal of Medical Case Reports and have provided responses to the reviewers’ individual comments below. I have also tracked all changes on the revised manuscript.

1. Reviewer #2: Oral involvement of syphilis is a relative common manifestation, it can be present at any stage of the disease.

In the reported patient the skin rash is very suggestive of syphilis

-The revised manuscript highlights the relevance of this case as only the second report of a primary chancre located on the hard palate of the oral cavity. The revised manuscript also includes a more extensive analysis of the literature and describes the common sites of oral involvement to demonstrate why our case is unique.

2. Reviewer #3: Inadequate background section

-The revised manuscript includes a more detailed background section on the oral manifestations of syphilis and highlights the contribution of our case to the existing literature on oral syphilis.
3. Reviewer #3: ethnicity not given. Some components of history are missing which is interesting in the history. For example in this case sexual history and history of genital lesions are important though nothing is mentioned.

- The patient’s sexual history and history of genital lesions have been included in the revised manuscript. However, the authors agreed that including the patient’s ethnicity was unnecessary in this case.

4. Reviewer #3: Genital examination missing

- The patient’s genital examination revealed no lesions. This information has been included in the revised manuscript.

5. Reviewer #3: Diagnostic details inadequate. Only a non treponemal test is performed. A treponemal serological test is required in a case like this. Though investigations like dark field microscopy or other direct methods are not very specific such a test on mucosal lesion might further provide evidence for the lesion on palate to be a chancre.

- The patient had a positive MHA-TP. This laboratory finding has been included in the revised manuscript.

6. Reviewer #3: Authors mention that patient improved after treatment, but the gap between treatment and follow up or response of different symptoms are not described

- The patient experienced an immediate improvement of his systemic symptoms (fever, malaise, and sore throat) during the week following treatment. Repeat RPR was 1:64 six weeks after the initial presentation. His rash, lymphadenopathy, and dysphagia were resolved at his follow-up appointment four months after initial presentation with repeat RPR titers of 1:8. This information has been included in the revised manuscript.

7. Reviewer #3: Further detailed analysis of of available literature on oral manifestations of syphilis and comparison with symptoms of the above patient is required.

- A more detailed analysis of the oral manifestations of syphilis, including a distinction between the manifestations of primary and secondary disease and the common locations of lesions in each setting, has been included in the revised manuscript to highlight the relevance of this case as only the second to report of a primary chancre located on the hard palate.
8. Reviewer #3: Is the Abstract representative of the case presented? Inadequate

-The abstract in the revised manuscript contains more information and highlights the relevance of this case presentation as one of the first to report of a primary chancre located on the hard palate. The abstract also highlights the patient’s rare presentation of marked submental lymphadenopathy associated with his lesion.