

## Format for ANSWERING REVIEWERS



May 18, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 8327.doc).

**Title:** Parathyroid carcinoma in pregnancy

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**Name of Journal:** *World Journal of Clinical Cases*

**ESPS Manuscript NO:** 8327

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

**Reviewer 505149** There are definitely no fabricated data in the manuscript, there short scientific terms like USG, PHD, MEN are defined and explained, Figure legends are in more details now ( in Figure 1 colours on ultrasound picture are part of Doppler effect), references are checked.

**Reviewer 503222** The term PHD is pathology report, the genetic issues are going to be performed as a programme for a bigger study investigation all parathyroid carcinomas in the institution, now in revised manuscript it is only mentioned. USG term is ultrasound, now is explained. Definition of atypical adenoma is explained to, and also there is a reference confirming the term. Also, there is an explanation describing difference among carcinoma and atypical adenoma of parathyroid gland. Term anisomacronucleosis is explained (now written anisonucleosis). It is clearly mentioned now that the patient was not tested for HRPT2 mutation, but it is planned to do so. It is described in deities now that only one parathyroid gland is removed, and term describing removal of „all parayreoid tissue“is modified. The data from this case are compared with other case reports (comparing clinical presentation), out come, but the suggested table was not done because there were no sufficient data for all of instances required. Although, it is described in text. New PET CT is planed too. Systemic problem pf hyperparathyroidism is described (osteoporosis, without fractures). Tumour size and pathology are described in more details. Finally, it is stressed that such unusual parathyroid histology should treated surgically more aggressively.

**Reviewer 1350278** There details of pregnancy are added (how long the hyperemesis gravidarum was presented , how long after delivery the first surgery was carried out, follow-up, time interval of the second pregnancy and new symptoms). Second pregnancy was described in more details, and explanation about prenatal outcome and general outcome of malignant disease id distinguished. The treatment and necessity of more aggressive surgery id pointed . Full names of abbreviation are added, grammatical mistakes improved, Figure order is improved and explained in more details.

**Reviewer 2669968** There are more descriptions about imaging methods (in discussion section). Also more information about second pregnancy and baby are added. The SPECT finding is discussed. The scan of 99mTc sestamibi scan is added to figure 1, also PET/CT images are added. English grammatical errors are corrected.

3 References and typesetting were corrected, with the help of professional editor

Thank you again for publishing our manuscript in the World Journal of Clinical Cases, also for giving me more time to do all the work with revision process

Best regards

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