Author's response to reviews

Title: Impact of intraoperative fluid administration on outcome in patients undergoing robotic-assisted laparoscopic prostatectomy - a retrospective analysis

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Author's response to reviews: see over
Dear Editor,

Thank you very much for reviewing our manuscript entitled ‘Impact of intraoperative fluid administration on complications and length of hospitalisation in patients undergoing robotic-assisted laparoscopic prostatectomy – a retrospective analysis’ which is being re-submitted for publication in *BMC Anesthesiology* by Tobias Piegeler, Pamela Dreessen, Sereina Graber, Sarah R. Haile, Daniel Max Schmid, and Beatrice Beck-Schimmer. Enclosed please find a revised version, in which we have incorporated the reviewers’ comments.

This material is original and has not been submitted for publication elsewhere. All authors have read the revised manuscript, attest to the validity and legitimacy of the data and its interpretation, and agree to its re-submission to *BMC Anesthesiology*. All authors declare they have no competing interests.

We hope that this manuscript will now be suitable for publication in your journal.

Sincerely,

Tobias Piegeler, MD
Response to Associate Editor’s comments

It is actual subject and interesting paper. I think, it is have some problems.

1-What are the targets of fluid administration? Which parameters did they use? Urine out-put, blood pressure, CVP?

*We would like to thank the Editor for this important question. Most of our patients were not monitored by central venous pressure as we do not routinely put a central venous line in our patients undergoing RALP. Additionally, due to the nature of the surgical procedure, urine output could not be monitored. Therefore blood pressure values in combination with heart rate were used as clinical correlate for the patient’s fluid status. We have added a small section in the manuscript, dealing with this issue.*

2-They should rewrite conclusion. They could not say say goal directed fluid regimen. Because they have not got any information about this conclusion.

*We agree with the Editor and have thus changed this part of the conclusion in accordance with the findings of our study.*

3-Do they have any data about patient’s albumine level or osmolarity? Because these parameters direct related anastomotic leak after the operation.

*Again, this is a crucial question. However, albumine levels were not routinely monitored. Our patients with ASA status I-III were not expected to have a deviation neither in the pre- nor in the postoperative period. Osmolarity was also not determined on a regular basis in the postoperative period in our patients. Based on our experience patients show the ability to undergo a self-regulatory correction back to normal values within hours in case osmolarity values are not in the physiological range.*

4-What is mean of restrictive or liberal fluid regimen? Authors should give some information in introduction section.

*Although widely used in the anesthetic literature, the terms ‘restrictive’ and ‘liberal’ concerning fluid management remain poorly defined. In accordance with the Editor’s suggestion we have added a paragraph regarding this issue to the introduction of our manuscript.*