Author's response to reviews

Title: Crotaline Fab antivenom appears to be effective in cases of severe North American pit viper envenomation: An integrative review

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Dear Editor,

Thank you for reviewing our manuscript, now retitled, “Crotaline Fab antivenom appears to be effective in cases of severe North American pit viper envenomation: An integrative review.” Please extend our gratitude to Drs. Sano-Martins, Norris, and Winkel for their kind suggestions and attention to detail.

As requested, here is a revised final version of the manuscript. We attempted to incorporate all of the reviewers’ comments. We would like to bring the following to your attention:

With regard to Dr. Sano-Martins’ comments: We incorporated all recommended revisions, with one exception. Dr. Sano-Martins recommended that,

It will be useful to explain in Introduction what is the Crotalidae Polyvalent Immune Fab (Ovine) FabAV, and the whole-IgG pit viper antivenom, as well as the advantages and disadvantages of each one, such as side effects, frequency of recurrence, etc.

We considered this request carefully. Information about the relative risks and benefits of whole IgG versus Fab antivenom has been included in more than 100 articles about crotaline FabAV published in the last 15 years. Because we have nothing to add to this discussion, and because whole-IgG antivenom is no longer available for as a treatment option, we believe this would unnecessarily prolong the Background section. We have added a reference to a comprehensive review article (Dart 2001b) that treats this subject in full detail.

All of Dr. Sano-Martins’ other suggestions have been incorporated in the revised manuscript.

With regard to Dr. Norris’ comments: We acknowledge Dr. Norris’ observation that not all snake envenomations are reported to poison centers, and agree with his observation that the NPDS average of 2,700 human snake envenomations per year is an undercount. However, we are unaware of a more accurate citable data source. Other than reporting, “at least 2,700 people…seek hospital treatment” [emphasis added], we are unable to address this concern. As requested, we have strengthened our acknowledgement of these limitations when discussing Kitchens’ case report on page 15.
All of Dr. Norris’ other suggestions have been incorporated in the revised manuscript.

With regard to Dr. Winkel’s comments: At Dr. Winkel’s suggestion, we took a fresh look at all of the included studies to verify that no duplicate cases were reported. After a series of email exchanges with the authors of two studies, Drs. Sean Bush and Steven Offerman, we concluded that one case was reported twice. We have removed the offending case and revised our calculations accordingly. No material changes were necessary to the conclusions of the study.

Thank you once again for such a prompt and detailed review. Please advise us of any additional necessary steps.

Sincerely,

Eric Lavonas, MD