Author's response to reviews

Title: Acute pulmonary embolism in the era of multi-detector CT: a reality in sub-Saharan Africa.

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This sentence "Authorization for the study was obtained from the institutional authorities." was inserted into the abstract and into the methods (patients) as recommended.

Cover Letter

There is very little published data on acute pulmonary embolism in sub-Saharan settings. Pulmonary embolism has been considered to be a very rare finding in this milieu, and its diagnosis has often been clinical, or associated with the presence of deep vein thrombosis on Doppler ultrasound. This has largely been due to the lack of diagnostic facilities over the years; conventional angiography, ventilation-perfusion scans and D-dimer assays have not been widely available and/or accessible in this milieu. The progressive introduction of multi-detector computed tomography in health facilities in sub-Saharan settings has been a useful diagnostic tool in investigating suspected cases of acute PE and other cardiothoracic diseases.

The purpose of this study therefore was to use multi-detector computed tomography to directly diagnose acute pulmonary embolism in patients with a clinical suspicion, hence providing documented data on the occurrence of the problem in this milieu where very little is known. This will build a platform for future investigations that will throw more light on the subject. This article demonstrates the use of up-to-date imaging techniques (multi-detector computed tomography) to diagnose acute pulmonary embolism in a specific area; we expect to provide scientific knowledge on this pathology concerning the sub-Saharan setting, and we think it fits well in the policy of BMC Medical Imaging.

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