Author's response to reviews

Title: Ascites due to right atrial myxoma in a haemodialysis patient

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Reply to Kevin C Abbott

Thank you for your observations.

We have tried rectifying the grammatical mistakes.

The ascitic fluid was a transudate, and the abdominal ultrasound examination did not show any suspicious lesion. It was then queried as to whether the patient could have a pericardial effusion. Both a CT scan and a cardiac ECHO were requested, and the CT scan was performed before the ECHO.

In retrospect he had developed ascites first and then only shortly before his admission did he develop detectable peripheral edema.

The ECHO showed that the myxoma was causing obstruction to right ventricular filling, and when he arrested the myxoma caused complete obstruction with no palpable cardiac output.

We would recommend an ECHO in haemodialysis patients who present with right sided cardiac failure, in particular with ascites and a low/normal blood pressure.

Reply to Ali Ihsan I Gunal

Thank you for your observations.

Both a CT scan and a cardiac ECHO were requested, and the CT scan was performed before the ECHO. We would normally have performed the ECHO before the CT scan.

Reference requested has now been included.

We now also have the written permission of the patient's wife to proceed with the case report, a copy of which has been forwarded to her.