Author's response to reviews

Title: Spontaneous Dural Tear Leading to Intracranial Hypotension and Tonsillar Herniation in Marfan Syndrome-A Case Report

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Author's response to reviews: see over
Dear Reviewer's

Thank you very much for your comments and suggestions for our manuscript.

Please find the responses below for each concern raised:

Referee 1:

1. The authors should make clearer whether the MRI ‘myelogram’ was done with intrathecal contrast - if not was it really a myelogram?

Response:
Yes, it was indeed an MRI Myelogram with intrathecal contrast. The need for specifically mentioning ‘intrathecal contrast’ was not felt as myelography itself implies that a contrast agent was used during the procedure. However, you will find that we have specifically added the term ‘with intrathecal contrast’ in the latest revised version.

Referee 2:

1. I would recommend using the term “orthostatic” instead of postural. The clue for the diagnosis of this syndrome is that the symptoms appear or aggravate on standing and that should be emphasized for the reader. There are “postural” headaches which appear or aggravates on lying down.

Response:
Point is well taken. Orthostatic headaches are indeed a hallmark sign of this syndrome. ‘Postural’ has been replaced with ‘Orthostatic’

2. The authors highlight the tonsillar herniation in this case. Tonsillar herniation due to brain sagging is a common finding in SIH (as they say in the Introduction). I mean that if it is not reported more specifically in the literature is because it is a well-known finding in such cases. They should cite the landmark reference for this: Atkinson et al. J Neurosurgery 1998; 88: 237–42.

Response:
Reference has been added to manuscript.


3. They are right that description of SIH is mainly due to Mokri, but it is not true that the “objective description” took place in 2003. This reference is a review paper (not even the best by Mokri). Reference 16 is the perhaps the most important reference in this regards and it was published already in 1996.

Response:
We did some further research on this and came across this paper: ‘Rando TA, Fishman RA: Spontaneous intracranial hypotension: report of two cases and review of the literature. Neurology 42: 481-487. 1992’. In this the authors objectively described CSF opening pressures of less than 60 mm H2O in two patients.

We have added this reference in place of ‘Mokri B: Headaches caused by decreased intracranial pressure: diagnosis and management. Curr Opin Neurol. 2003; 16:319–326’. Reference 16 has also been cited as suggested.

We hope we have adequately addressed the raised concerns. Changes made in the manuscript in accordance with the suggestions are highlighted in yellow.

Sincerely,

Farhan Arshad Mirza.