Author's response to reviews

Title: Unusual MRI findings of dural arteriovenous fistula: Isolated perfusion lesions mimicking TIA

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Author's response to reviews: see over
Cover letter with Point-by-point

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To BMC Neurology Editor,

The authors would like to thank Editor for careful review of our manuscript and providing us with comments and suggestions to improve the quality of the manuscript.

We made changes to incorporate your comments and highlighted in the revised manuscript. (See below)

Sincerely yours,

Yang-Ha Hwang on behalf of the authors.

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A. Abstract (corrections)
1) “And the pattern of perfusion-weighted imaging” to “The pattern of perfusion-weighted imaging”
2) “Reported cases are rare clinical presentation of a AVF, which can be” to “Reported cases are uncommon clinical presentation of a dAVF, which can be”

B. Discussion
1) We made changes in the first paragraph of discussion session per your suggestion. (See below)

We reported two cases of dAVF that presented with transient neurological symptoms. For the clinical standpoint, these type of transient symptoms more frequently correspond to TIA or other conditions such as seizures, migraine, psychiatric conditions, toxic-metabolic derangements, or neuropathy.[3, 4] In our cases, the clinical history of a brief episode of focal neurological dysfunction accompanied by the imaging evidence of a perfusion deficit in an appropriate area could have led to the diagnosis of transient neurological symptoms attributable to ischemic pathology.[5] ICH occurred after misdiagnosis in case 1, and the small area of perfusion abnormality accompanied by the enlarged cortical vein in case 2 helped to identify the dAVF through the further investigation. Unlike arterial ischemia, PWI revealed increase of MTT and rCBV denoting the venous congestion in a clinically corresponding area in both cases.[6-8] The DSA showed parietal dAVF supplied by the middle meningeal artery and draining to cortical vein in the area corresponding perfusion deficit on PWI.

2) We deleted second paragraph in the discussion session per your suggestion.

C. Conclusions
A. We deleted the sentence “The prognosis TIA or TIA mimics is not always favorable” per your suggestion.