Title: Norepinephrine-evoked pain in Fibromyalgia. A Randomized Study.

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We appreciate the reviewer’s criticism and comments. We followed their recommendations:

In response to Dr. Barkhuizen’s suggestions:
1. We provide in a new table 3, a list of discontinued medications with their corresponding half-lives in both patient groups. A comment regarding the effect of long-acting antiinflammatory medications on the results is included (page 7 bottom). In addition we provide number of patients on other centrally-acting agents, the response to NE was not different in those FM patients taking centrally acting drugs from the rest of the group (top of page 8).
2. It is now stated throughout the article that normal saline was the vehicle for injections.
3. We corrected grammar.
4. The conclusion sentence was corrected.
5. Typographic error was corrected.
6. Reference’s date was corrected.

Dr. Abdollah’s comments were already included in the original version.

In response to Dr. Willan:

In outcome measures:
1. We state VAS scale length.
2. We state that the outcome measure is the difference between the VAS score in the active arm minus VAS score in the placebo arm.

In randomization:
Left arms were injected first.

Statistical analysis:

We changed to ANOVA analysis with Bonferroni’s multiple comparison test to study inter-group differences. Significant differences remained. Table 1’s values are now given as mean and standard deviations.

In response to Mr. Bullsara’s comments:
1. We now highlight in the title that this is a pilot study.
2. As stated before, we changed statistical method to ANOVA with Bonferroni's corrections.
3. Of course there are significant baseline differences among the three groups. Such differences cannot be controlled.
4. Heart rate was not measured. Heart rate variability analysis is a complex cybernetic technique completely different from simple heart rate determination.
5. We clarify NE-evoked pain definition.