Author's response to reviews

Title: Blind Loop: Rare but Important Surgical Complication

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Version: 7 Date: 23 June 2014

Author's response to reviews: see over
Dear Par Myrelid,

Thank you very much for your comments and advice. I have detailed the changes made below as per your suggestions:

1. Paragraph 2 of the discussion: added “and what the senior surgeon had done and intended. During our procedure, the surgical director and chief resident were present throughout its entirety”.

Dear Christopher Young,

We very much appreciate the time taken and thoroughness of your review. While patients with Crohns disease frequently acquire bowel obstructions and fistulas, what makes our patient unique in our eyes is that our patient had normal bowel function with no evidence of obstruction and intraoperatively the fistulized segment of bowel was completely independent of his remaining, normally functioning bowel. It is possible that Crohns disease could be the etiology of this finding, however, because this segment did not communicate at all with his normal anatomic bowel, we believe that is was most likely a surgical complication where a segment of bowel that was meant to be removed was left within the abdomen and then the forgotten segment fistulized with the skin. I have detailed the changes made below as per your suggestions:

1. Paragraph 1: Deleted “worldwide are dreaded by” replaced with “invoke dread in”.
2. Paragraph 2: Deleted “Our patient is a”, “The”, “does” and “and”
3. Paragraph 4: Deleted “receiving a full” and “of”. Changed “explanation” to “explaining”.
4. Paragraph 6: Changed “Tedious” to “Extensive”
5. Paragraph 7: Inserted 2 sentences about our patients postoperative course.
7. Paragraph 13: Deleted to 2 sentences speculating on the “better” of 2 serious complications.

Thank you for your consideration!

Sincerely,

- John Michael DiBianco