Author’s response to reviews

Title: TITLE: Liver abscess secondary to a broken needle migration- A case report

Authors:

Chintamani Chintamani (chintamani7@rediffmail.com)
Vinay Singhal (chintamani@doctor.com)
Parminder Lubhana (chintamani@doctor.com)
Rakesh Durkhere (chintamani@doctor.com)
Shabnam Bhandari (chintamani@doctor.com)

Version: 3 Date: 20 Aug 2003

PDF covering letter
Reviewer 2: We thank the reviewer for kind suggestions and observations and the desired changes have been made. The point wise reply follows:

1. We fully agree with the remarks of the reviewer that a plain X ray abdomen could have facilitated early referral, however it did not happen, like in many cases managed at such very remote and inaccessible primary care centers. For the initial part of his treatment the patient was in his village under the care of a quack and a witch doctor, hence was not investigated on recommended lines. The referring physician was however a qualified doctor and he referred with the suspicion of intra-abdominal sepsis almost immediately for ultrasound abdomen after doing the x-ray abdomen, routine blood (total counts, smear for malarial parasite) and urine investigations. There was thus no delay at the health center.

2. The point is well taken and the mistake has been rectified. The location of the abscess was in segment five (Couinaud’s). The operative findings revealed an anteriorly located abscess in segment five i.e. the right lobe of the liver and not in the postero-inferior segment.

3. We apologize for the errors, and the needful regarding the references has been done.

4. The reasons prompting presentation are (a) Limited reported cases (b) No history of ingestion of the foreign body in the present case (c) Right lobe instead of left being involved in the present case unlike majority of other cases reported where left lobe is involved (table 1a, b).

5. We thank you for this observation and a table (being sent as two attachments) containing the reported cases and the present case to summarize and highlight the differences in presentation, treatment and outcome of most of the reported cases has now been incorporated.

6. The final sentence was essentially for the extra hepatic foreign bodies and has therefore been removed from the text. There is no published report to suggest successful application of laparoscopy in hepatic abscesses due to migrating foreign bodies.