Reviewer's report

Title: Bilateral linear scleroderma "en coup de sabre" associated with facial atrophy and neurological complications

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Reviewer: Prof Peter Itin

Level of interest: A paper of considerable general medical or scientific interest

Advice on publication: Accept after discretionary revisions

I have read with great interest the above mentioned manuscript. The authors describe an unusual course of scleroderma en coup de sabre an hypothesize that a relation to Parry-Romberg syndrome exists.

Careful study of the literature reveals that severe types of scleroderma en coup de sabre associated with autoimmune phenomena and neurological problems have often in the laboratory signs of autoimmunity such as reactive anti-nuclear factors. I highly suggest to control periodically these laboratory investigations.

In case scleroderma en coup de sabre develops early in infancy asymmetric skull development occurs giving the aspect of Parry Romberg syndrome. It is also our experience and we follow a patient now for 15 years which developed with 4 years of age scleroderma en coup de sabre and now has full-blown Parry Romberg syndrome.

Introduction:
In general the clasification of localized scleroderma is much broader including also atrophodermia Pierini-Pasini and eosinophilic fasciitis. In addition some authors include white spot diseases. I suggest to give a source of an official recent classification scheme on localized scleroderma.

Case report: instead of denied say refused

Taken all together this is a well illustrated case mirroring the difficulties in separating Parry Romberg syndrome. And I agree that scleroderma en coup de sabre in infants can end in the clinical picture of Parry Romberg syndrome.

Competing interests:
None declared.