Author's response to reviews

Title: Effectiveness of ovarian suspension in preventing post operative ovarian adhesions in women with pelvic endometriosis: A randomised controlled trial.

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Version: 2 Date: 17 April 2011

Author's response to reviews: see over
Dear Ms. Neilan,

Thank you very much for your letter. We are also very grateful to the reviewer for his helpful comments. We have amended the manuscript according to his suggestions:

1) **It is unclear what the value of ultrasound is to assess adhesions (ultrasound examination assesses ovarian mobility) and whether ovarian adhesions outside the pelvis can be equally well assessed.**

The assessment of ovarian adhesion using targeted palpation with a transvaginal ultrasound probe has been well evaluated by different authors. Guerriero et al. found that the fixation of the ovary to the uterus evaluated by transvaginal ultrasonography, had a good specificity (86%) and high positive predictive value (PPV) of 81%. More recently, Okaro et al. found good correlation between ovarian mobility on transvaginal ultrasound and at laparoscopy (kappa 0.81). These positive results were also shared by Holland et al.


The paragraph on the use of ultrasound in the assessment of ovarian adhesions in the discussions section of our manuscript has been amended to clarify this. Assessment of ovarian adhesions outside of the pelvis is not usually required as the ovaries usually reside within the pelvis post operatively.

2) **The definition of severe endometriosis is not that clear: results could vary when exclusively unilateral cystic ovarian endometriosis (with side wall adhesions) was included or bilateral or only large plaques in the pouch of Douglas or deep endometriosis of the rectum, rectosigmoid, sigmoid or bladder.**

The reviewer is correct in stating that there will be variations in the pelvic pathology of patients with severe endometriosis. However, as stated in the methods section of our inclusion criteria, only women in whom surgery for endometriosis requires extensive dissection of both pelvic side walls and/ or rectovaginal space with preservation of the ovaries and uterus will be included in our study.

We hope that you will find these modifications satisfactory and that you will be able to accept our paper for publication in your journal.

Yours sincerely,

Wee Liak Hoo