Author's response to reviews

Title: Percutaneous Treatment of Patients with Heart Diseases: Selection, Guidance and Follow-Up. A review

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Author's response to reviews: see over
Dear Dr Picano and Dr Sicari

Enclosed is the revised version of the above manuscript by myself and others for your consideration for publication in Cardiovascular Ultrasound. We appreciate the thoughtful consideration given to our manuscript, and we have carefully followed the Reviewers’ comments that we consider appropriate and relevant to our work. We think that, by adhering to their suggestions, the manuscript is significantly improved and more readable. Our replies to the Reviewers’ comments follow.

Reviewer #1:

We appreciate the Reviewer's considerations.

Specific comments.
1. We divided the manuscript into 2 parts: 1st) interventions in valvular heart diseases; and 2nd) closure of PFO, ASD etc.
2. A sentence regarding the role of TEE in the diagnosis of PFO was already reported in the Subheading “Diagnosis of PFO”, indicating that TEE is considered the gold standard, although many papers indicate that it could be used only when a better anatomic definition is required.
3. We added a sentence in the Subheading “Echocardiography Guidance of Percutaneous PFO and ASD Closure” clarifying that during procedure for PFO closure echocardiography is not required.
4. The paragraph on migraine patients has been deleted.
5. We added some sentences in the text to describe better the role of echocardiography during MitraClip procedure.

Reviewer #2:

This Reviewer suggests interesting considerations.

1. We agree that the review covers too many different aspects of the same disease (from the pathophysiology to the treatment) and, consequently, it is sometimes generic. However, at same time, we think that cardiologists usually approach clinical cases, step by step, i.e. from the pathophysiology to diagnosis and eventually to treatment, thus, they must know the state of art of each step. Nevertheless, as suggested by the reviewer, to increase the paper readability, we deleted some sentences, within the subheadings, regarding indications which were already reported in the relative tables.
2. Unfortunately we cannot improve image quality of leak closure procedure.
3. Adequate description of echocardiographic approach to Mitraclip has been extended in the text and it has been reported in the figure legend of the relative pictures.
4. We described overall the devices used for LAA closure; moreover, in this chapter we added a figure relative to a very recent case of our institution, with device migration after procedure.

5. We deleted the sentence “TEE is indispensable for annulus measurement…..” and we substituted it with: “TEE is performed only if an accurate measurement cannot be made by TTE or if borderline values lead to doubt the feasibility of the procedure ”. Moreover, we thank the reviewer for suggesting to discuss the role of echocardiography in the prosthesis selection and during screening for TAVI: we added some sentences and a reference note (#21) relative to that issue. We cancelled “ off- label” for subclavian approach for CoreValve.

6. Conclusions have been extended.

Minor Comments

1. Figure 7 (before revision # 2) panels A e B were referred in the text.
2. We agree that some figures are of low quality. However, they represent the real scenario that cardiologists and sonographers face in their daily clinical practice. Nevertheless, the panel A of figure 13 has been deleted.
3. Mistypes of references (before revision # 37 e 39 and others) have been corrected.
4. On page 13 the Figure has been correctly referred.
5. We improved English throughout the manuscript as well as language appropriateness.

As the corresponding Author and on behalf of all other Authors, I hope you will find this manuscript of interest to the readers of Cardiovascular Ultrasound
Thank you in advance for your time.

Yours in faith,
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