Author's response to reviews

Title: Lack of Association Between Chlamydia Pneumoniae Serology and Endothelial Dysfunction of Coronary Arteries

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Author's response to reviews: see over
Dear Professor Picano:

Enclosed please find our revised manuscript entitled: *Lack of Association Between Chlamydia Pneumoniae Serology and Endothelial Dysfunction of Coronary Arteries*. The reviewer’s comments have been added as far as possible. Their implications improved the quality of the manuscript. The following changes of the manuscript were made:

We added the study limitation of the low sample size in the discussion (page 11). This limitation of our study is caused by the difficulties in recruiting patients. We screened 1144 patients for the study, but only 18 patients fulfilled the strict inclusion criteria.

According to your suggestion to discuss recent major trials we discussed and added the following references which questioned the hypothesis that chlamydia pneumoniae (CP) infection is a major cause of coronary artery disease:


As suggested by the reviewer, we analyzed our data base for any correlation between coronary flow velocity reserve (CFVR) and the flow velocity increase during high dose acetylcholin (Ach) infusion: but the calculated correlation coefficient was r = -0.19.

The idea of the reviewer that stress tests may predict endothelial dysfunction (ED) of the coronary arteries is very interesting. We analyzed our database, but we did not find any difference in stress-test results between patients with and without ED. It would be of diagnostic value to use cofactors or new markers of non-invasive stress-tests predicting an ED of the coronary arteries. However, we did not find conclusive results regarding this questing even in highly selected cardiomyopathy patients [Richartz BM, Werner GS, Ferrari M, Figulla HR: *Reversibility of coronary endothelial vasomotor dysfunction in idiopathic dilated cardiomyopathy: acute effects of vitamin C*. *Am J Cardiol* 2001, 88:1001-1005].

All requested formatting changes were made according to the reviewer’s list of suggestions. I hope that the revisions satisfy the reviewers, and the paper can be accepted for publication in *Cardiovascular Ultrasound*. 
Sincerely Yours

Markus Ferrari, MD