Author's response to reviews

Title: Primary Cardiac Sarcoma: Reports of Two Cases and a Review of Current Literature

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Author’s response to reviews: see over
February 23, 2007

Vipin Zamvar  
Editor in Chief Journal of Cardiothoracic Surgery  
Royal Infirmary of Edinburgh  
Edinburgh

Dear Mr Zamvar,

Subject: Revised manuscript: Primary Cardiac Sarcoma: Reports of Two Cases and a Review of Current Literature

Thank you very much for your review of the above mentioned paper. We have made following changes to the manuscript. The specific replies to each of the reviewers are in the next page.

1. We agree with the reviewer that the fact that most of the cardiac sarcomas are diagnosed at the time of operation is far from satisfactory and we aim to raise the awareness of the readers on this issue.
2. We also agree with the comment that adjuvant treatment with radiation in one of our patient is not based on any scientific evidence. There is no consensus evidence on this issue and the decision was made by a panel of oncologist after extensive multidisciplinary discussion. This is one of the facts we wanted to highlight in the paper regarding cardiac sarcoma.
3. We have revised paragraph 2 of discussion to include the four mechanisms of symptom manifestations.
4. In the discussion of preoperative imaging we have elaborated on the role of CT and MRI.
5. We have enclosed a CT picture in figure 1.
6. We have updated the report of transplanted patients (ref 11 Gowdamarajan A et al) in the revised discussion.
7. In the discussion we have included the suggestion of a national referral centre for comprehensive management of cardiac malignancies.
8. We have revised the predictors of long term survival in discussion.
9. We have revised the conclusion.

Thanking you very much for your help. Kind regards.

Yours truly,

Mohan Devbhandari  
Corresponding author
Reply to
Dr Lakshman Bahadur Paudyal Kshatri

Dear Dr Kshatri,

Thank you very much for your review and helpful comments. We have enclosed CT scan pictures in the revised manuscript (figure 1).

Reply to
Dr Michael Reardon

Dear Dr Reardon,

Thank you very much for your review and helpful comments. We have made following changes to the manuscript.

1. We agree that the fact that most of the cardiac sarcomas are diagnosed at the time of operation is far from satisfactory and we aim to raise the awareness of the readers on this issue.
2. You have made a positive comment that adjuvant treatment with radiation in one of our patient is not based on any scientific evidence. There is no consensus evidence on this issue and the decision was made by a panel of oncologist after extensive multidisciplinary discussion. This is one of the facts we wanted to highlight in the paper regarding cardiac sarcoma.
3. We have revised paragraph 2 of discussion to include the four mechanisms of symptom manifestations.
4. In the discussion of preoperative imaging we have elaborated on the role of CT and MRI.
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