Reviewer’s report

Title: Extra corporal membrane oxygenation in general thoracic surgery: new canulation

Version: 1 Date: 13 February 2011

Reviewer: Christophe C Pison

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This isolated case-record is interesting since it pushes frontiers of thoracic surgery in patients with very limited gas exchange reserves. In these cases, even short partial exclusion of ventilation during procedure is incompatible with survival and in fact excludes these patients from life saving surgical procedures.

Minor Essential Revisions

Complete information of the patient should be reported regarding the risk benefits of such a new procedure. History of Aspergilloma needs further brief informations regarding its context.

Comments

- This technique requires a cardio-vascular and thoracic environment:
- This technique will not improve a low post-op FEV1 but allow a transient partial exclusion of ventilation during surgery that could not be possible otherwise, which represent an actual progress.
- Limits of this method should be briefly discussed, for example pulmonary hypertension?

Editing should be improved:
- capital lettering for authors is not desirable;
- institutions: names in French
- references are very poorly reported; ref. 1 could be replaced by the positive controlled trial CESAR reported in Lancet 2009;374:1351-63; 2 and 6 are duplicated!
- english should be corrected by a native MD;
- quality of figures is problematic : advertisement should be avoided; CT slice needs better resolution

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Declaration of competing interests:
I declare that I have no competing interests.