Author's response to reviews

Title: Totally Biological Composite Aortic Stentless Valved Conduit for Aortic Root Replacement: 10-year Experience

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Author's response to reviews: see over
Dear Dr Vipin Zamvar,

Thank you very much for allowing us to resubmit a corrected version of our manuscript. We are also grateful to the reviewer for the interesting questions and valuable suggestions. We have answered to all the questions and made the suggested changes to the revised manuscript as indicated below and are very happy to resubmit a new revised corrected marked and unmarked version of the manuscript for your consideration.

Hoping to hear from you.
Sincerely,

Manuel Galiñanes

Answers to the Reviewer:

We would like to thank the Reviewer for the interesting questions and valuable suggestions. We have answered all the questions and modified the manuscript in the following manner:

(1) **Statement on ARR by patients suffering from AAA and AVR:** The Reviewer suggests that the David/ Yacoub operation is the one of choice and when this is not possible then it should be performed a Bentall. We agree with the Reviewer on this statement that has been incorporated into the revised manuscript.

(2) **Pulmonary autograft implantation as root should not be mentioned as a standard:** We also agree with the Reviewer on this point and therefore this statement has been removed in the revised version.

(3) **Type of euroSCORE used:** The Reviewer requests the specification of the euroSCORE used in our study. This was logistic euroSCORE and has now been added to the manuscript. The reason for the euroSCORE being elevated is that the operated patients were of high risk.

(4) **Temperature during circulatory arrest and cerebral perfusion:** The temperature during circulatory arrest was taken in the oesophagus and cerebral perfusion was not used. These clarifications have also been made in the revised manuscript.

(5) **Data collection and guidelines reference:** As suggested, this reference has been inserted.

(6) **Reason for replacement of the aortic root:** 80.6% of patients had an aneurysm of the aortic root and ascending aorta, 13.4% presented with acute dissection and 6% with infection. This was not expressed appropriately in the previous manuscript but has now been clarified in the revised version.
(7) **Statement on post-operative echocardiographic findings:** This data was not initially included because we were worried about the length of the manuscript. However, we agree with the Reviewer that these data should be showed and therefore have included a table (Tables 3 and 4) containing these results in the revised manuscript.

(8) **Immunological evaluation of explanted valves:** Only one valved conduit was explanted and the investigations performed are shown in Figure 2.

(9) **Were the valves covered by human endothelial cells rather than porcine endothelial cells? Were DNA investigations performed?:** The source (human versus porcine) of the endothelial cells on the graft was not investigated but it will be expected that they are coming from the same patient since the process of graft preparation eliminates any endothelium of porcine origin. This comment has been incorporated to the revised manuscript. Unfortunately, we did not performed DNA investigations in this instance.

(10) **What is mentioned with low life exp. Should this be short..?:** The Reviewer is correct and the word low has been replaced by short. Thanks.

(11) **Data of Ross operation are not complete, as meanwhile people know that outcome is depending on the procedure and surgeon. This should be added in the discussion:** We agree with the reviewer that the outcomes on the Ross operation also depend on the surgeon executing the procedure. This important comment has also been incorporated to the revised manuscript.

(12) **Ref 24 should be modified:** Ref 24 has been modified and is ref 25 in the revised version of the manuscript.

We believe the manuscript has been improved and hope that the editor and the reviewer are happy with the answers to the questions and the changes made to the revised manuscript. Thanks.