Reviewer’s report

Title: Phosphodiesterase 5 Inhibitors Lower both Portal and Pulmonary Pressure in Portopulmonary Hypertension. A case report.

Version: 3 Date: 16 April 2007

Reviewer: Michael J Krowka

I am familiar with the literature and believe that this case meets one of the 7 criteria for evaluation in the journal: An unexpected event in the course of observing or treating a patient

Has the case been reported coherently?: Yes

Is the case report authentic?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: Yes

Does the case report have explanatory value?: Yes

Does the case report have diagnostic value?: No

Will the case report make a difference to clinical practice?: Yes

Comments to authors:

General

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Revisions necessary for publication

A concise case report describing improvement in both pulmonary and portal hemodynamics with phosphodiesterase inhibition.

1) Although improvement was noted at 3 months, can the authors speculate why no further hedonic change was seen at 6 months?
2) Could it be that vasoconstriction was relieved initially, but no further vascular remodeling occurred with PDE inhibition?
3) Why not sildenafil at 20 mg tid (as opposed to bid) as reported in the major NEJM study?
4) Was obstructive sleep apnea considered as part of the reason for PH? (108 kg)
5) In the Discussion you mention “Vardenafil” in the first paragraph. I am confused. Are you referring to a previous study or case and if so reference it and comment on the pulmonary hemodynamics in that case.
6) In the Discussion, paragraph # 2, last sentence. Your data refer to only this case and should be extrapolated to “no risk factor for bleeding…”
7) In the Discussion, para # 5. The use of beta blockers are relatively contraindicated one would think and the worrisome affect may be on limiting the right ventricle function as opposed to causing vasoconstriction

What next?: Revise and resubmit

Quality of written English: Acceptable