Author's response to reviews

Title: Ruptured ovarian cystic teratoma in pregnancy with diffuse peritoneal reaction mimicking advanced ovarian malignancy: a case report

Authors:

Sachchidananda Maiti Dr (d_maiti@yahoo.co.uk)
Zamurrad Fatima Dr (drzfatima@hotmail.com)
Z.K Anjum Mr (Zul.Anjum@pat.nhs.uk)
R.E Hopkins Mr (Ron.Hopkins@rbh.nhs.uk)

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Author's response to reviews:

Dear Editor,

Journal of Medical Case Reports

RE: Revised manuscript on `Ruptured ovarian cystic teratoma in pregnancy with diffuse peritoneal reaction mimicking advanced ovarian malignancy: a case report¿/ 02.01.2008

I have thoroughly revised the manuscript according to the meticulous instructions from the peer reviewers.

In the introduction I have explained why this case is unique to make it more `persuasive¿ because no other case in the literature showed granulomatous peritonitis following ruptured dermoid cyst.

CA125 (tumour marker for epithelial ovarian tumour) was negative. AFP was not performed, as this is difficult to interpret in pregnancy. Scan was very convincing so that I did not describe these in details.

The reason for resection of the bowel loops was provisional diagnosis of infiltrative malignancy.

I have added the reference of using steroid in granulomatous peritonitis caused by glove powder.

This is an interesting rare clinical presentation of ruptured dermoid cyst in pregnancy. This highlights importance of awareness and using clinical skills with appropriate investigations for optimal management of this potentially life crippling complication.

If you need further information, please contact me at d_maiti@yahoo.co.uk.

Kind regards
Yours sincerely