Author's response to reviews

Title: Cold Saline Irrigation of the Renal Pelvis During Radiofrequency Ablation of a Central Renal Neoplasm

Authors:

Jose Pablo Morales (jpmorales@doctors.org.uk)
Tarun Sabharwal (Tarun.Sabharwal@gstt.nhs.uk)
Marios Georganas (gmarios@doctors.org.uk)
Renato Dourado (Renato.Dourado@gstt.nhs.uk)
Declan Cahill (Declan.Cahill@gstt.nhs.uk)
Andreas Adam (Andy.Adam@kcl.ac.uk)

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Response to Reviewers’ Comments

Reviewer 1 (Evangelos Liatsikos)

- Page 4, paragraph 1, Lines 2-11 have been added regarding the available options including cryoablation.
- Figures have been re-arranged according to the Journal of Medical Case Reports requirements of maximum 3 figures per case report. Three figures quoted chronologically in the text and three figure legends.
- Page 6, paragraph 1, lines 1-6 have been added mentioning and citing the recent study by Margulis V et al. (references 9) as suggested.
- Page 7 and 8: References have been re-arranged based on the Journal Medical Case Reports instructions.

Reviewer 2 (Tze M. Wah)

- Page 6, paragraph 1, lines 6-8. Reference suggested was already quoted in original submission (it was originally reference 10 and now reference 11).
- Page 6, paragraph 1, lines 6-8. The use of normal saline and dextrose during RFA has been reported with good results in both techniques.
- Regarding the concerns raised by reviewer Tze M. Wah, the two references quoted (ref 9, 10) support saline infusion and RFA in the kidney. One is in pigs and the second via a nephrostomy.
Dr Wah’s publication in JVIR 2005 (ref 11), is a similar case report to ours but using dextrose. In that reference they stated, "that saline has been safely used with RFA, but because of theoretical side effect to saline with rfa they preferred dextrose". But they provide no-scientific evidence to support this assertion.

As the cold saline used in our case was infused using a retrograde ureteric catheter, with no puncture (as in nephrostomy) to pose a risk of leakage, we considered its use safe and still believe this to be the case. Dr Wah’s consideration of conduction is not of practical significance when the fluid is confined to the urinary tract. We believe that it is more important to use dextrose when infusing fluid into the retroperitoneum to displace bowel loops away from the kidney and this is our standard practice.

Yours sincerely,

The Authors