Author's response to reviews

Title: Reversal of isolated unilateral optic nerve edema with concomitant visual impairment following blunt trauma: a case report

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Author's response to reviews: see over
The Editor in Chief  
Journal of Medical Case Reports  
Professor Michael Kidd

Re: Reversal of isolated unilateral optic nerve edema with concomitant visual impairment following blunt trauma: Case report  
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Dear Editor,  
Dear Professor Kidd,  
Ladies and gentlemen,

in following your kind invitation which I received beginning of last month via E-mail, I submit my case report entitled “Reversal of isolated unilateral optic nerve edema with concomitant visual impairment following blunt trauma: Case report” for publication in the new “Journal of Medical Case Reports”.

Serious injury to the optic nerve is an uncommon entity but may result in permanent visual disability. Isolated trauma of the optic nerve is usually associated with blunt skull trauma involving fractures of both skull and optical canal, but may also occur from blunt ocular trauma. The author reports briefly on a patient who developed an isolated unilateral optic nerve edema with corresponding visual deficits following a rear-end collision accident. The coincidence with the traumatic event, the absence of any eye pathology prior to the traumatic event and the exclusion of any alternative cause for an optic nerve swelling, for example confounding anterior segment pathologies, optic nerve neuritis, ocular ischemia/vascular occlusion, hemorrhage, vascular dissection, tumor, osteopetrosis and intracranial hypertension, prompted the diagnosis of a post-traumatic unilateral optic nerve contusion. The patient quickly responded to corticosteroids and the further sequelae was uneventful.

The author feels that this rare entity should be shared with the clinical community, especially with those members involved in trauma care. The case report is augmented by one figure which shows the morphological correlate as well as by an up-to-date review of previous cases in the field. Within the discussion section of the case report detailed information on potential diagnostic and therapeutic approaches and strategies is provided.

The present work is not under consideration for publication elsewhere. The author believes that the manuscript represents honest work, and is able to verify the validity of the results reported. There is no conflict of interest by the author of the present manuscript. All research reported here was conducted according to internationally accepted ethical guidelines.

The authors are looking forward to your editorial decision
Sincerely your

Marc Maegele