Dear Editor,

Dr. Thomas Koroscil and I would like to resubmit our case report titled "Erythromelalgia: A rare condition" after making changes in response to questions and comments made by the reviewers. The manuscript ID is 1003236891243632, originally submitted on December 22, 2008, and resubmitted on Feb 24, 2009.

Thank you for getting the case report peer reviewed and providing me an opportunity to resubmit the manuscript.

We would like to express my gratitude to the reviewers – Drs Waxman and Drenth, for their questions and insightful comments. Their questions and comments have been addressed in the sections below and the manuscript has been modified accordingly.

Below is a point-to-point response to the reviewers’ comments, including details of changes made to the manuscript where needed.

Response to comments by Dr. J P Drenth:

1. Comment: "They have included some info on the use of mexiletine, and report that it ‘did not work’. In order for us as treating physicians to really appreciate the experience by these authors I would like to see that the authors to address the following questions. (1) which dosage, (2) what was the dosage interval (3) how did the authors increase the dosage with time (as is required with this drug) (4) were there any side effects (5) how did they measure the effect (6) how long was treatment given."

Response: The case report has been modified (as detailed below) to include the dosage, period, side effects and result of mexiletine therapy on the patient.

"Recently, patient also tried mexiletine. She started with 100 mg twice a day (BID) and was increased to 200 mg BID after 2 weeks. She had no improvement and the dose was increased 4 weeks later to 200 mg three times a day (TID). She noted some nausea but no other side effects. After a month, the dose was further increased to 300 mg TID for 4 weeks. Given the lack of clinical
improvement, mexiletine was tapered and discontinued."

The feedback from the reviewers is appreciated and we will be glad to answer any questions.

Sincerely,

Shobhana Gaur