Author's response to reviews

Title: Unusual presentation of a giant thoracic schwannoma as an abrupt onset of abdominal pain

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Author's response to reviews: see over
Response to Reviewers:

Reviewer's report #1

Comments to authors:
This case report is supposed to be a clinical case. The clinical presentation of the patient should be more detailed especially regarding the history of the pain (previous symptoms? cramps? continuous pain? Migration? Nausea? Vomiting? Etc.) and of the abdominal examination (defence? Rebound tenderness? Bowel sounds? Temperature?). Were any blood tests performed?
How much time between the peritoneal biopsy and the onset of pain? Any link? How much time between the admission (for pain) and the neurological impairment? Any explanation why both clinical presentations happened during his stay? Was there an event that might have been overlooked?

This is an excellent suggestion, we have made these revisions to include more clinical details in reference to the patient and blood tests. We also now note the temporal course of events.

Work up:
What kind of endoscopy was performed? Upper, lower?
No abdominal ultrasound was performed on the patient. It’s the most valuable exam in acute abdomen especially if appendicitis is suspected (which was the reason for the exploratory laparotomy) Exploratory laparoscopy would have been sounder especially if appendicitis is suspected (or any other abdominal process if the patients’ condition allows it)

We agree with this suggestion for clarification and have added the clarifications to the revision.

Diagnosis:
Was the diagnosis of schwannoma based on the imaging studies (unlikely) What was the path report? Diagnosis of schwannoma should be briefly discussed through imaging studies and pathological/histochemical examination

This is an excellent point and we have added some discussion accordingly.

Discussion: Good discussion but family history and clinical and/or genetic considerations regarding schwannomas (solitary versus multiple and
neurofibromatosis type 2) are lacking. A brief explanation might add some value to the reported case.

We agree with this suggestions and we have revised the discussion accordingly.

Reviewer's report # 2
Comments to authors:

This is a presentation not commonly seen in neurosurgery. Schwannomas of the spine rarely come to clinical attention in this fashion. For these reasons, the report is of clinical significance for both surgeons as well as general practioners alike. The case presentation and discussion of the literature is coherent and appropriately comprehensive. The author's should note the wording of the final sentence of the abstract introduction; "presenting as acute abdominal pain". The figures are instructive of the case. Would suggest, if possible, addition of an abdominal CT image given the case is applicable to multiple fields. I would recommend this article as a high priority for publication.

Thanks and we appreciate the positive feedback on this paper. We did take note of the acute abdominal pain reference and have altered the title and discussion accordingly. We are grateful for the positive remarks and agree with your suggestions.