Author's response to reviews

Title: Sudden deterioration due to intratumoral hemorrhage inside ependymoma of the fourth ventricle in an infant during flight

Authors:

Ali Mahdavi (mahdavi0ali@yahoo.com)
Nima Baradaran (baradaran.nima@gmail.com)
Farideh Nejat (nejat@sina.tums.ac.ir)
Mostafa El Khashab (mostkask@yahoo.com)
Maryam Monajjemzadeh (Monaj@yahoo.com)

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Author's response to reviews:

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Title: Sudden deterioration due to intratumoral hemorrhage of ependymoma of the fourth ventricle in an infant during flight
Dear Editor
We went through the comments of both referees and answered to the comments point to point and included them in the revised manuscript. We appreciate their efforts to review this manuscript.

Comments from reviewer Mr. Mahmoud Mohammadi:

It is really hard to approve a cause and effect by a case report and it actually deserves other researches with appropriate methodology! But it is quite interesting and could be a base for further studies!

Answer: We have suggested a relationship between hemorrhage and air travel according to the existing data including having a CT scan lacking hemorrhage done a few weeks before flight, being relatively stable according to neurological state for days before flight in such a way that the parents started to go to capital city for seeking more treatments and sudden deterioration during travel at the presence of good mental state and awareness at the time of take off and existence of good functioning shunt after resuscitation and admission in PICU which was associated with a massive hemorrhage inside the tumor(revealed intraoperatively). All of the above mentioned information proposes the flight as the most probable cause of hemorrhage in spite of being unable to perform a CT or MRI to show this pathology imaging wise.

Comments from James Owens:

Comment 1: Although the case report could certainly use some editing for style and English syntax and grammar, the case is laid out coherently.
Answer: We revised the manuscript for English writing and we hope this correction is the same that the reviewer had considered.

Comment 2: This case report describes a hemorrhage into an anaplastic ….. it is difficult to say with certainty that the hemorrhage occurred during the flight itself. Post-flight imaging is not provided, but this would be helpful since the signal characteristics of blood evolve over time on MRI.

Answer: It was answered at answering to the comment of reviewer one.

Comment 3: Also, it is not stated what the maximal altitude achieved on this flight was (since flights of relatively short distances may not involve as high an altitude as is seen in longer flights).

Answer: As we checked with the technicians expert in air traveling as a job, the maximum altitude for this trip is around 25,000 feet that we included it inside the revised manuscript in page 2 paragraph 2 line 6.

Comment Finally, I'm not sure that there is any evidence that a CO2 level which does not exceed the FAA standard of 5% causes any change in cerebral blood flow. If the authors are aware of such data they should provide a reference, otherwise this is likely not a necessary speculation.

Answer: We do not have documented information about CO2 level.

Related to the payment for publishing the paper, we will pay the mentioned amount after acceptation of this paper.

We are looking forward to receive your opinions about the current revision of this manuscript.

Regards
Ali Mahdavi MD
Nima Baradaran MD
Farideh Nejat MD, MPH
Mostafa El Khashab MD, PhD
Maryam Monajemzadeh, MD