Author's response to reviews

Title: Progressive Multifocal Cerebral Infarction from Intravascular Large B-Cell Lymphoma Diagnosed by Random Skin Biopsy: A Case Report

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Author's response to reviews: see over
Response to Comment from Reviewers: ‘Kosei Matsue’.

I would like to give a point-by-point response as follows:

1) Author should describe the other laboratory abnormalities related to the IVL, such as CBC, sIL2R, ferritin etc. In addition, Asian patients with IVL frequently complicate the hemophagocytic syndrome. Bone marrow infiltration of lymphoma cells should be described. Because this patient exhibited hypertriglyceridemia, this suggests the possible presence of hemophagocytic syndrome.

   - As reviewer’s suggestion, I added the result of CBC in the text already. In my case report, CBC showed only mild anemia throughout the hospital course. There was no leucopenia or thrombocytopenia.
   - There is no sIL2R test available in my hospital.
   - Ferritin test was not done because I think it is not specific and it can be elevated in any cause of fever.
   - Bone marrow in this case was normal without the evidence of hemophagocytosis or lymphoma involvement. I additionally described the bone marrow finding in the text already.
   - Hypertriglyceridemia in this case may be caused by nephrotic-range proteinuria. There were no strong and firm evidences of hemophagocytosis in this case.

2) Use of random skin biopsy in patients with IVL was best described by Asada et al and by Matsue et al, these papers should be cited.

   - I have already cited these two papers in references.

3) Quality of written English: Not suitable for publication unless extensively edited.

   I have sent full paper to be edited by my faculty English editor and corrected as his suggestion.