Author’s response to reviews

Title: Massive Right Sided Bochdalek Hernia with two Unusual Findings: a case report.

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Professor Michael Kidd
Editor in Chief
Journal of Medical Case Reports

Dear Professor Kidd,

Please accept this resubmission to your journal of the manuscript “Massive Right Sided Bochdalek Hernia with two Unusual Findings: a case report”.

Here is the point by point responses to the reviewers comments.

Dr. Vagefi’s comments:

1. It is unknown which organs were already herniated. The hepatic herniation I expect was not new given the intraoperative findings and the cholecystitis was the reason the patient presented. This point has been emphasized in the manuscript.

2. The pleural references “our” and “we” have been removed in the manuscript.

3. An additional CT image of the herniated viscera has been added to the manuscript as Figure 3.

4. Labeling has been added to the operative images.

5. The follow up chest film is acceptable for this procedure and does not show recurrence. There is no follow up CT scan.
6. The relation with NRH has been removed in the manuscript. However, as it is an interesting finding in this case, it is reported in the manuscript without the references to causality. The patient did not have evidence of portal hypertension and this is emphasized in the paper.

7. The etiology of the cholecystitis is unclear but probably not related to the hernia and this is reported as such in the paper.

8. The emphasis on abdominal compartment syndrome has been minimized in the manuscript. The description on postoperative bladder pressure measurements, etc. has been removed. There were concerns for abdominal hypertension during the operation and this is better stated in the paper. A prophylactic mesh was placed and is also emphasized in the manuscript.

Dr. Yamauchi's comments:

1. Unfortunately it is impossible to comment on the actual size of the hernia. It was a massive hernia, the severity is proportional to the number of organs displaced. Comment is made in the manuscript that the diaphragm was nearly absent.

2. A period of 24 hours was undertaken to resuscitate the patient prior to surgery and this has been added to the manuscript.

3. The term NRH has been added throughout the manuscript to ensure consistency.

4. In figure 4, x-ray has been changed to X-ray in the title.

Thank you again for this consideration. I hope you will find the revised manuscript acceptable for publication to your journal.

Sincerely,

Subrato J. Deb, MD