Author's response to reviews

Title: Guidelines disobeyed - A severe complication associated with manual therapy of the cervical spine in a patient with Forestier's disease: a case report

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Author's response to reviews: see over
Dear Reviewers,

We would like to thank you for the constructive review that led to a significant improvement of the paper. Please find in the following the answer to your requests.

Sincerely yours

Maximilian J. Hartel
Corresponding Author
Answers to reviewer’s comments:

Reviewer: Vijayakumar Javalkar

Comments to authors:
In this case report authors present a case with preexisting Foresteirs disease who develops neurological complication related to spinal subluxation following neck manipulation. Authors point out that if the physiotherapist had taken adequate history then this complication could have been avoided. Neurological complications following neck manipulation are well described in the literature. This case report is not unique. There are already existing guidelines in place for neck manipulation by physiotherapist. The paper doesn’t add anything more to the existing guidelines.

Answer: The intention of our report is not to propose new guidelines to the standard of care. It should rather serve as a reminder to health care providers of the potentially severe complications associated with manipulation therapy at the cervical spine. In our opinion there is still some disagreement in the literature on the actual degree of risk of complications following manual therapy procedures. For example, Dawn Carnes at al. estimated in their review a risk rate close to zero (0.01% per patient) for major adverse events. (Carnes et al. 2010) This review has been heavily criticized by Prof. Edzard Ernst, as ‘about half of all RCTs’, also cited in Carnes’ publication, ‘fail to report AE’s (note: adverse events) completely…..’.(Ernst 2010) Then again Roger Kerry states in his critical literature review in 2008 addressing the association between cervical spine manual therapy and cervical artery dysfunction, that ‘it is currently impossible to meaningfully estimate the size of the risk of post-treatment complications’. (Kerry et al. 2008). As long as this disagreement accompanied by a heated debate between advocates and opponents of spinal manipulation therapy persists, the publication of case reports like ours may in our opinion still add new and important information to this field.

Reviewer: Thomas H Wuerz

Comments to authors:
Please refer to comments provided in attached document.

Answer: We would like to thank Dr. Wuerz for the valuable feedback. All suggested changes were adopted.
Reviewer: Haymo G Thiel

Comments to authors:
This is an interesting clinical case describing a rare complication associated with manual therapy, which should be published following revision.

1. As a general observation, I would suggest that the authors ask a native English speaker/academic to edit the manuscript in detail, as grammar and syntax need attention throughout.

Answer: Reviewer 2 has done a great job suggesting changes to the whole manuscript. They were adopted without exception. Furthermore, a native speaking academic has once again cross-read the manuscript. We hope these measures will suffice. If not, we will of course have the manuscript edited again.

2. As the details of the therapeutic intervention are not known, I feel it would be more appropriate to change the title to: 'Guidelines disobeyed - A severe complication associated with manual therapy of the cervical spine in a patient with Forestier's disease: a case report'.

Answer: The title has been changed as proposed.

3. To make the underlying condition more recognisable to an international readership, I would suggest to modify the first sentence of the Case Presentation (page 3, line 13) as follows:...a 56 year old male with Forestier's disease (also known as diffuse idiopathic skeletal hyperostosis).

Answer: The first sentence in the case presentation has been changed to the following: “We present a 56 year old male with Forestier’s disease also known as diffuse idiopathic skeletal hyperostosis (DISH).”

4. It would be of benefit to provide a brief description of how common Forestier's disease is, and in what type of patient it is likely to be encountered.

Answer: See now page 3 lines 14-17: “Forestier’s disease is a common spinal enthesiopathy that is mostly encountered in men, older than 50 years. A prevalence of 28% has been found in an autopsy study in persons with an average age of 65. DISH is more common in patients with diabetes and gout.”

5. There is too much detail provided under the sub-headings of 'Surgical Intervention' (page 4, line 15 to page 5, line 6) and ‘Course’ (page 5, lines 14 to 21). I would suggest that the authors try to summarise this further.

Answer: The sections 'Surgical Intervention' and 'Course' have been summarised. See page 4, lines 16-21 and page 4 line 23 to page 5 line 11.
6. To give only one reference (Malone et al., 2002) for a risk estimate for complications following manual treatment is not balanced enough. It would be better to give a range of estimates on the basis of more up to date, and especially more robust, research data (Malone's et al. estimate was based on retrospective case reports of only 22 patients seen in one single neurosurgical practice). For example, please refer to the recent systematic review by Dawn Carnes et al. entitled 'Adverse events and manual therapy: a systematic review' Manual Therapy 2010;15:355–363, for a more in depth review of the subject area.

Answer: The Discussion section has been expanded. Page 5, lines 16-18 and lines 20-25