Author's response to reviews

Title: Huge extradural hematoma with mild symptoms in a patient with arachnoid cyst (Case report and review of the literature)

Authors:

Afsoun Seddighi (aseddighi@qums.ac.ir)
Amir Saied Seddighi (invincible19152@gmail.com)
Hesam Rahimi Baqdashti (bagdashti.hr@gmail.com)
Ali Reza Zali (dr_a_zali@yahoo.com)

Version: 3 Date: 4 August 2011

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

Thanks a lot to assess our paper in your journal. We performed the revisions as noted by the reviewers. We corrected the grammatical errors. In response to the questions asked by the reviewers we should mention that the grade 2 papilledema was resolved in the follow up examinations. The epidural bleeding was of venous origin and due to tear of the meningeal vein by impact which progressed due to lack of tamponade by the brain parenchyma in the setting of arachnoid cyst.

We also changed the title to “Huge extradural hematoma with mild symptoms in a patient with arachnoid cyst (Case report and review of the literature)” and deleted the term “asymptomativ presentation” as requested by the reviewers.

We also mentioned an indication for CT in trivial trauma in patients with abnormal skull shapes. They many might have minor bleed which wouldn't need intervention however we need to document for medico-legal severity of injury and compensation.

One of the reviewers noted that the differential of porencephalic cyst is more striking than an arachnoid cyst and asked for MRI. We should mention that in during the operation we saw the membrane of arachnoid cyst and also we performed a biopsy and the pathologic view was also provided in the paper to clear any debate. Unfortunately the cost of MRI was too high for the patient and he could not afford it.

We compared our patient with other studies such as the description of chronic EDH by Merih, Badley and Sparacio. In our case, CEDH was diagnosed 72 hours after the head trauma and after craniotomy the extradural hematoma appeared as
motor oil liquid. This time period is consistent with the Merih and Sparacio’s study and can be assumed to be chronic.

It would be a great honor for us if you consider our case report in your respectful journal.

Sinceerely Yours,

Dr. Afsoun Seddighi, Dr. Ali Reza Zali, Dr. Amir Saied Seddighi, Hesam Rahimi Baqdashti