Author's response to reviews

Title: A diagnostic dilemma between psychosis and PTSD: a case report

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Author's response to reviews: see over
Dear Editor of Journal of Medical Case Reports,

Below we give a point-by-point response to the concerns addressed by the two Referees of our article entitled “A diagnostic dilemma between psychosis and PTSD: a case report”.
We hope to have made all the necessary changes according to the concerns of both Reviewers. We also hope this new version of the manuscript was upgraded regarding publication in JMCR.

Best regards,

The authors

Ricardo Coentre, MD

Paddy Power, MD

3rd October 2010
Response to Reviewer Ross White

1. As suggested by this reviewer in this revised version of the manuscript we included the word ´criteria´ in the sentence “At clinical interview, she clearly fulfilled at this time for PTSD and psychosis not otherwise specified (NOS) criteria according to DSM-IV-TR.” (page 4).
Response to Reviewer Kim T Mueser

1. As suggested by this reviewer in this revised version of the case report we made a careful review, edition and changes in some words and phrases throughout the paper as listed below:

   a) We changed “fallen pregnant” to “became pregnant” (page 3):
   “She became pregnant and the woman who had given her shelter for 2 years now asked her to leave.”

   b) We changed “Our patient had PTSD symptoms, as recurrent distressing image…” to “Our patient had PTSD symptoms, including recurrent distressing image…” (page 5):
   “Our patient had PTSD symptoms, including recurrent distressing image of the traumatic event, with markedly diminished interest and participation in significant activities and avoided thoughts and conversations associated to the trauma.”

   c) We changed “In a psychological point of view…” to “From a psychological point of view…” (page 6):
   “From a psychological point of view there is a relationship between pre-existing cognitive schemas of the individual and thought patterns emerging after the traumatic event.”

   d) We changed “…in devising an appropriate treatment…” to “…in developing an appropriate treatment…” (page 7):
   “Establishing a correct diagnosis is imperative in developing an appropriate treatment strategy, particularly when the presence of psychotic symptoms necessitates the use of antipsychotic medication.”

   e) We changed “…our patient will benefit…” to “…our patient could benefit…” (page 8):
   “Besides the psychopharmacological therapy, our patient could benefit from one of these psychotherapeutic programs targeting PTSD symptoms.”

   f) On page 5 we reformulated the original sentence to the following to make it clear:
   “There are few case reports about the presence of PTSD with psychotic features, mainly war veterans, but none using trifluoperazine as psychopharmacological treatment.”
2. To make the main idea of the new paragraph on page 5 clearer we changed the words “both disorders” to “PTSD with psychotic symptoms”. On page 5 we also included the sentence “In patients who don’t have another established severe mental illness the presence of psychotic symptoms in PTSD might be better captured as a dimension or subgroup of PTSD than as psychosis NOS. “ as suggested by this reviewer and with whom we totally agree.

3. On page 6 we included a sentence noting that PTSD with psychotic symptoms have also been reported in non-combat related cases of people with PTSD but not with schizophrenia or bipolar disorders:

“PTSD with psychotic symptoms has also been reported in non-combat related cases of patients with PTSD but not schizophrenia-spectrum or bipolar disorders.”

4. As suggested by this reviewer on page 8 and 9 we included a paragraph highlighting that when psychotic symptoms are present in people with PTSD who do not have a well established severe mental illness, they could respond to conventional psychotherapeutic treatments used in the treatment of PTSD in general population:

“As in the case report published by Waldfogel et al., when psychotic features are present in people with PTSD who do not have a well established severe mental illness, these patients might also respond to conventional psychotherapeutic treatments that have demonstrated efficacy for the treatment of PTSD in the general population [23]. Due to the paucity of published systematic studies, this is a field for future research.”

5. We underline that according to the instructions of the Journal of Medical Case Reports the authors have a limited number of references. We think that the references mentioned by this reviewer were very useful for this new revised version of the article but unfortunately we could not add them all.