Author's response to reviews

Title: Takayasu arteritis presenting with massive cerebral infarct in a 35-year-old female a case report

Authors:

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Version: 3 Date: 16 April 2013

Author's response to reviews: see over
Reviewer's report

Title: Takayasu arteritis presenting with massive cerebral infarct in a 35-year-old female: a case report

Version: 2 Date: 21 March 2013

Reviewer: Bernhard Schaller

If other, please specify:

- The textbook knowledge should be omitted.

Answer: Amendment has been made according to your suggestion.

- The surgical treatment option should be discussed in relation to the current case. Please cite in this context the following paper (Neurrol Neurochir Pol. 2007) and discuss the indication.

Answer: More articles have been read and comments added in our manuscripts. The article you suggested is in Polish so that we only reviewed the abstract instead of full text.

- The authors should better demonstrate what is really new in this case.

Answer: It is a rare but devastating presentation of a rare disease, with only a handful of cases reported in our review of existing literature. And its management is completely different from other causes of cerebral infarcts, so we consider it worthwhile for more attention.

Reviewer's report

Title: Takayasu arteritis presenting with massive cerebral infarct in a 35-year-old female: a case report

Version: 2 Date: 29 March 2013

Reviewer: Katsutoshi Takayama

I have reviewed Takayasu arteritis presenting with massive cerebral infarct in a 35-year-old female: a case report

I have four comments for this paper.
1) Authors should mention the etiology of cerebral infarction in this case.
I think this case was cerebral infarction due to embolism from DWI findings.
What was embolic source?
Authors should address following paper in discussion and cite.
Answer: The article has been read and comments added in our manuscript.

2) I think quality of Fig 4 is not enough. I cannot understand occlusion of right subclavian artery and narrowing of right internal carotid artery showed in the Fig4.DSA (not live image) should be changed. And I think the name and birthday of the patients included in the DSA image should be deleted.
Answer: The information about the patient has been removed from the image.
We appreciate your suggestion. The quality of the figure has been adjusted.

3) Authors should mention cerebral aneurysm rarely also occurred associated with Takayasu arteritis in discussion.
Authors should address following paper in discussion and cite.
Answer: We appreciate this suggestion and have read this article thoroughly.

4) Authors should mention how to manage to prevent cerebral infarction for the young patients are diagnosed Takayasu arteritis in discussion.
Answer: Early diagnosis and initiation of proper treatment to control the progress of Takayasu arteritis could be beneficial in preventing cerebral infarction, as discussed throughout the manuscript and stressed again at the end of discussion.