Author's response to reviews

Title: A 44-year-old patient with a new-onset seizure disorder after vaccination against Japanese Encephalitis: a case report

Authors:

Christoph Schulze (chrisinro@aol.com)

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Author's response to reviews: see over
Christoph Schulze, MD  
Department of Orthopaedics  
University Medicine  
Doberaner Strasse 142  
18057 Rostock  
Germany  

Editor in chief  
Journal of medical case reports  
Prof. Michael Kidd AM

Rostock, November 16th 2012

Dear Editors,

I enclose the revised manuscript with the title: “A 44-year-old patient with a new-onset seizure disorder after vaccination against Japanese Encephalitis: a case report” as a case report for consideration in the Journal of medical case reports.

I thank both referees and the editor for the helpful comments. I will answer the comments point by point. Changes in the manuscript are highlighted. I changed the manuscript and hope that it will be suitable for publication now.

Referees comment:

Whilst this may be of interest especially as stated by the author, has not been a documented association with JEV, there are issues with the case report that renders the case unconvincing.

First, the patient experienced his multiple seizures in the setting of numerous other vaccinations (not just JEV) being administered around the sound time, some of which have been reported to be associated with seizure occurrence.

Answer to the referee

The referee is right, that several vaccinations had been administered and for 3 of them there are reported cases of seizure (Piyasirsilp et al.; 2002) but as mentioned in the part introduction these vaccinations had been administered more than 14 days (at least 21 days in this case) before the JE-vaccine was administered and seizure
occurred. Barlow et al.; (2001) published that within a period of 14 days after vaccination seizure can be associated to the vaccination. So it is more plausible that seizure is attributable to the JE-vaccination. I changed the manuscript to point out these facts more clearly.

Referees comment
The author constantly states throughout the text that the seizures were a result of the JEV. Even if the case was in the context of just JEV, a causation cannot be justified but only an association can be inferred.

Answer to the referee
I agree with the referee and changed the text that conclusions are formulated more moderate.

Referees comment
The investigation results were also poorly reported and relevant negatives were omitted. It would have been important to the reader to know whether the MRI scans of the brain obtained had appropriate sequences performed, for example if a focus at the temporal or hippocampal regions were undertaken. The lumbar puncture results need also be reported even though the author stated they were unremarkable. Equally, the original "normal" EEG results need a bit more detail.

Answer to the referee
I thank the referee for this comment. I presented this case from the view of a general practitioner. The information in accordance to the MRI provided from the hospital did not provide any technical information. So I am not able to provide a statement if appropriate sequences were performed. But the description of the MRI says that there were no relevant structural changes in the hippocampal or right frontal region. The medical reports of the hospitals did not provide all requested information, but I changed the manuscript to give more detailed information about the results of the apparative diagnostics as they have been provided to me.

Editors comment
Make clear what is unique with this case.
**Answer to the editor**

This is the first report of seizure may be associated with vaccination against JE in literature. It is shown, that treatment is very difficult in this case. A successful standard operating procedure can not be provided. Patients should be treated individually according to their individual symptoms.

Dr. Becker left no comments to answer to.

We replace the word white in patient´s details as requested. We did language proof, format and style corrections by a native speaker as suggested by the referee.

I hope the revision makes this case more coherent and plausible to the reader. You should bear in mind that this is a report of negative results. So it is hard to present new knowledge how to manage a case like this. But especially in cases of medical assessment it will be helpful to know that this complication is possible. I hope it is suitable for publication.

Sincerely,

Christoph Schulze, MD
First author