Author's response to reviews

Title: Persistent psychogenic deja vu: a case report

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We thank the referees for their time in reviewing the above manuscript. We have made several improvements following their suggestions, and our point-by-point responses to the reviewers are below.

Reviewer 1

Authors submitted an interesting case report which shall be published. My only concern is with the extensivity of the neurological investigation, and especially with the proof of patient not being suffering from non-convulsive complex partial status epilepticus. It is necessary to specify in the paper what types of MRI (i.e. sequences - T2 included?) and EEG (nativ, sleep deprivation, prolonged EEG, supplemental recording electrodes - anterotemporal?) have been performed. I am wondering if patients underwent other investigations (e.g. FDG-PET, SPECT or CSF examination) which can help to exclude underlying epileptic or organic pathology within a mesiotemporal region. If results of these investigations are missing, this issue should be discussed more cautiously.

- The case report includes all the information that was made available to us; however the neurological investigation was carried out at a centre with experience in the diagnosis of epilepsy. We have therefore now amended the text to include the following detail: ‘Routine EEG and MRI were performed at a centre with experience in the diagnosis of epilepsy and were both normal.’ We have also amended our concluding statements to provide a more cautious discussion regarding the exclusion of an underlying neurological cause. “There is no clear evidence in support of a neurological basis for his déjà vu, although we acknowledge that it is difficult to exclude this possibility absolutely, and therefore conclude this with caution”.
In relation to this point, we would suggest that the difficulty in being able to definitively exclude a neurological explanation strengthens the argument in favour of the reporting and characterising of psychogenic déjà vu, as by doing so can we gain clearer insight into the distinguishing features of psychogenic cases.

Reviewer 2

With interest I read this manuscript. Although the message is clear and very well written it is my believe that this topic is well known and that this case report will make little difference to clinical practice and will have a low level of interest. Compliments for the description of the phenomena of the experiences that were described.

We appreciate the query raised regarding the contribution this case study would make both to the literature and clinical practice. However, we would argue that there is a strong case to be made for the publication of this case study, as there is very little research on the topic of psychogenic déjà vu. Furthermore, a key strength of this report is that it addresses the issue of psychogenic déjà vu whilst considering both psychological and neurological explanations, thus aiming to encourage further discussion across the fields of clinical psychology and neurology. The differing reactions of the two reviewers illustrates the importance of further research on déjà vu which is open to both neurological and psychological approaches and explanations.

We have made an addition to the manuscript, describing Akgül et al (2013) in relation to our revised discussion regarding the possible contribution of an underlying neurological cause “A recent paper reported the case of a 13 year old girl who presented with persistent déjà vu but no clear symptoms of epilepsy. Detailed neurological examinations (EEG video monitoring) revealed the déjà vu feelings were auras associated with TLE seizures. This further supports the need for detailed investigations of patients presenting with what appears to be psychogenic déjà vu in order to rule out underlying neurological causes”.

Whilst revising the manuscript we have also added some further text to the second paragraph of the introduction, providing more detail regarding previous research into déjà vu in other clinical populations: ‘there has been some exploration of the comparative prevalence of déjà vu in patients with epilepsy compared with affective disorders [3] and phobic-anxiety depersonalisation syndrome [4]. Both of these reports indicate that these groups report similar frequencies of déjà vu episodes when compared to temporal lobe epilepsy patients. A recent review of TLE has called for further exploration of the link between clinical levels of anxiety and debilitating déjà vu, and suggested that further research is required to determine the nature of this relationship [1].’
We have done our best to satisfy the requirements of the referees, and feel that the manuscript has been improved following their comments. We hope that the responses and associated changes meet with their satisfaction, and that it is acceptable for publication.

Yours sincerely,

[Signature]

Christine Wells
Chris Moulin
Adam Zeman