Author’s response to reviews

Title: The Conundrum of Postpartum Thrombotic Microangiopathy: Case Report and Considerations for Management

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POINT-BY-POINT-RESPONSE

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The Conundrum of Postpartum Thrombotic Microangiopathy: Case Report and Considerations for Management

Katharina Artinger; Gerald Hackl; Gernot Schilcher; Florian Eisner; Marion J Pollheimer; Christoph Mache; Eva-Christine Weiss; Kathrin Eller; Philipp Eller
Your manuscript "The Conundrum of Postpartum Thrombotic Microangiopathy: Case Report and Considerations for Management" (BNEP-D-17-00580R2) has been assessed by our reviewers. Based on these reports, and my own assessment as Editor, I am pleased to inform you that it is potentially acceptable for publication in BMC Nephrology, once you have carried out some essential revisions suggested by our reviewers.

1. Please respond to the reviewer's comments below.

Response: We thank the Editor for coming to the conclusion that our case report is potentially acceptable for publication in BMC Nephrology. As suggested by the Editor and the Reviewer, we have corrected our manuscript and provide a detailed point-by-point response to their comments below.

2. In the section 'Funding', please also describe the role of the funding body in the design of the study and collection, analysis, and interpretation of data and in writing the manuscript.

Response: As suggested by the Editor, we have added the essential information that the Austrian Science Funds (FWF) did not have any role in the design of the study, and collection, analysis and interpretation of data and in writing the manuscript on page 7, line 6-7 within the section ‘Funding’.

3. Please remove the CARE checklist from the file inventory, as this is no longer needed at this time.

Response: We have removed the CARE checklist from the file inventory.
4. Please include the email addresses for all authors on the title page. The corresponding author should still be indicated.

Response: We have included the email addresses for all authors on the title page and have still indicated Philipp Eller as the corresponding author for the manuscript.

Reviewer reports:

Anupama Kaul (Reviewer 2): The case report itself mentions the clinical diagnosis from the beginning that it was a case of Preeclampsia with malignant hypertension and all the findings were suggestive of the same post partum it looks like TMA but TMA is presented with uneventful pregnancy which was not the case in your patient, PLEX was not required in this case and could responded without that also with control of hypertension post partum

Response: We thank the Reviewer for her comments. As pointed out by the Reviewer, it is essential to differentiate between preeclampsia, microangiopathic hemolytic anemias due to systemic disorders and primary TMA syndromes. Delayed recovery from PE/HELLP syndrome with malignant hypertension can clinically mimic primary TMA syndromes in the postpartum period and requests prompt control of hypertension. In the case presented, renal replacement therapy and plasma exchange therapy were both stopped on the 6th postoperative day after having reached a negative fluid balance of 20.5L and a platelet count of > 100G/L. In our opinion, we cannot deduce from this case report, whether the patient would also have recovered without PEX, renal replacement therapy and ultrafiltration.