Author’s response to reviews

Title: Occult Child Abuse Presenting as Pneumatosis Intestinalis and Portomesenteric Venous Gas - A Case Report

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Author’s response to reviews:

Professor Catherine Olino

BMC Pediatrics

Dear Professor Olino,

Oct 04, 2018

Re: Manuscript Reference No.: BPED-D-16-00604R1

Title: Occult Child Abuse Presenting as Pneumatosis Intestinalis and Portomesenteric Venous Gas - A Case Report

Please find attached the revised version of our manuscript for consideration of publication in the BMC Pediatrics. My coauthors and I have all read and agreed with the revisions, and we have tried our best to address all of the comments. The changes that have been made are described in detail below.
For the Reviewer

Bindi Naik-Mathuria (Reviewer 1):

This is a well-written case report describing an unusual finding. It is true that pneumatosis is seen most commonly in children as a result of NEC and mesenteric ischemia but is rarely described in conjunction with child abuse, and this is important to report because workup for child abuse may be missed if not considered as an association. Blunt abusive abdominal injury leads more often to bowel perforation, not really to bowel ischemia.

Answer: Thank you for your important comments.

Johannes Adalbert Mayr (Reviewer 2):

The article describes a very tragic case of pneumatosis intestinalis in an infant who sustained non-accidental trauma. The article is of interest for the readers of BMC Pediatrics.

Please can you provide the GCS you observed when the child arrived at your hospital (page 3, line 42).

Answer: Thanks for your comments sincerely. We added the initial GCS in the page 3 line 42 as following “The initial Glasgow Coma Scale was E1V1M1 when arrived at our hospital”.

In the discussion section discuss the role of "Child protection groups" in pediatric hospitals in Taiwan responsible for children who sustained possible non-accidental injuries, neglect, or abuse.

Answer: Thanks for your comments sincerely. We added the role of "Child protection groups" in pediatric hospitals in Taiwan in the page 7 line 16 to page 8 line 5 as following “In Taiwan, the Child Protection Medical Service Demonstration Center (CPMSDC) was established to protect children from physical, emotional ill treatment, sexual abuse, and neglect. Our hospital is one of the CPMSDC. This center is composed of social workers, case managers, psychologists, and medical doctors of pediatrics, ophthalmology, obstetrics and gynecology, neurosurgery, radiology, orthopedics, and psychiatry. The center is dedicated to identify and protect children who have been harmed or are at risk of harm, and whose parents are unable to provide adequate care or protection. These cases have been fully discussed at the meeting organized by CPMSDC monthly.”
Please discuss differences between "pneumatosis intestinalis" and "pneumatosis coli". The clinical course of pneumatosis coli is more benign when compared to pneumatosis intestinalis.

Answer: Thanks for your comments sincerely. We added the discussion about "pneumatosis intestinalis" and "pneumatosis coli" in the page 6 line 16 to page 7 line 2 as following “Pneumatosis coli is defined as gas within the wall of large intestine. In general, the clinical course and prognosis is better in patient with pneumatosis coli compared to pneumatosis intestinalis, because the range of intraluminal gas is shorter and only locate in large bowel in pneumatosis coli which the mucosal damage is more longer and severe from small bowel to large bowel in pneumatosis intestinalis [12].”

I recommend you change some phrases.

Page 3 line 20: delete "usually"

Answer: Thanks for your comments sincerely. We deleted "usually" in the page 3 line 20 as your comment.

Page 6 line 29: replace "is evidence of" by "represents a strong evidence for"

Answer: Thanks for your comments sincerely. We replaced "is evidence of" by "represents a strong evidence for" in the page 6 line 11.

Page 6 line 36: "pathophysiology is acute" by "pathophysiology of pneumatosis intestinalis is characterized by acute"

Answer: Thanks for your comments sincerely. We replaced "pathophysiology is acute" by "pathophysiology of pneumatosis intestinalis is characterized by acute" in the page 6 line 13 to 14.

Page 6 line 48: replace "symptoms" by "symptoms of pneumatosis intestinalis"

Answer: Thanks for your comments sincerely. We replaced "symptoms" by "symptoms of pneumatosis intestinalis" in the page 7 line 4.

Page 7 line 4: delete "highly"
Answer: Thanks for your comments sincerely. We deleted "highly" in the page 7 line 10.

Page 7 line 10-13: replace: "…are rare except in premature children and abusive…” by "…are very rare except in newborns born at term or premature children. Abusive…”

Answer: Thanks for your comments sincerely. We replaced " are rare except in premature children and abusive " by " are very rare except in newborns born at term or premature children. Abusive…” in the page 8 line 2 to 3.

Reference 11: replace "bluntabdominal" by "blunt abdominal"

Answer: Thanks for your comments sincerely. We replaced "bluntabdominal" by "blunt abdominal" in reference 11.

Please do not use capitalized letters in the titles of reference 13 and 14.

Answer: Thanks for your comments sincerely. We have revised the reference 13 and 14 as your comments.

Sincerely Yours,

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