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From: XXX YYY<xxx@yyy.zzz>

Sent: Fri, Dec 26, 2014 at 11:12 AM

To: Managing Editor

Subject: RE: Request for editorial decision for manuscript number 2014/BJMMR/15501

I reviewed the paper and I believe it is, generally speaking, acceptable for publication.

One other suggestion - I noted that the Abstract had a few typos in it... below, I would like to enclose a possible revision option (also attached as a Word file; tried to minimize changes; just to make sure the abstract "flows" on first read...).

Attached Part:

Abstract

Background:

Posterior reversible encephalopathy syndrome is a clinico-radiological entity that is characterized by variable associations of seizure activity, consciousness impairment, headaches, visual abnormalities, nausea, vomiting and focal neurological signs. No large data exists on the association of posterior reversible encephalopathy syndrome with renal failure.

Material and Methods:

This case series of five patients was collected to examine the association of two conditions and evaluate outcome. All these patients were enrolled in a tertiary care hospital over a period of two years. No informed consent was sought because the study was merely observational and did not demand deviations from standard.

Results:

Four patients presented with acute renal failure and one patient had established End-Stage Renal Disease. All the patients had hypertension at presentation besides other risk factors. All the patients had Magnetic Resonance Imaging documented posterior reversible encephalopathy syndrome. Despite intensive management, two patients did not show any improvement of blood pressure control and died. This observation raise the possibility that renal failure increases the mortality in patients with posterior reversible encephalopathy syndrome. However, our series is limited by small number of enrollees and hence no definite conclusions can be drawn from this observation.

Conclusion:

Posterior reversible encephalopathy syndrome should be considered in any patient of renal failure with neurological manifestations and aggressive management is warranted.

Editor's Details:

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Note: Modification was done in this document ONLY to hide the email id.