

May 17, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 11068-edited.doc).

Title: Incidental Findings of Pericardial Calcification

Author: Tin Nguyen, MD, Charles Phillips, MD, and Assad Movahed, MD, FACC, FACP

Name of Journal: *World Journal of Clinical Cases*

ESPS Manuscript NO: 11068

The manuscript has been improved according to the suggestions of reviewers:

Q: Authors explore the pathophysiologic reasons of pericardial calcification. In their case report the viral cause of pericardial calcification was not investigated.

A: It has been suggested that many patients with idiopathic acute pericarditis have an underlying viral infection; however, viral cultures and antibody titers have not proven to be clinically useful.^[1-3] In addition, the patient denied neither recent flulike symptoms to suggest viral pericarditis nor symptoms of right heart failures. He had no previous history of trauma or radiation to his chest, and his recent tuberculosis skin test was negative.

Q: Echo images of a pericardial non-constrictive calcification and of a constrictive pericarditis would enrich the manuscript.

A: An example illustrating respiratory variation of mitral and tricuspid inflow velocity of a patient with constrictive pericarditis was added per your request. Please see figure 3 and 4.

Q: The clinical implications of this finding should be better detailed. In their clinical case the patients underwent several examinations, which could have been avoided since he was asymptomatic for ischemic heart disease.

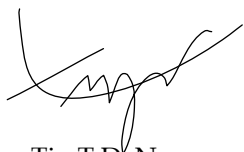
A: Exercise ECG stress testing was ordered by patient primary cardiology. It was for evaluation of persons with multiple risk factors and request to start vigorous exercise program. (Class IIB)^[4]

Reference:

- 1) Zayas R, Anguita M, Torres F, et al. Incidence of specific etiology and role of methods for specific etiologic diagnosis of primary acute pericarditis. *Am J Cardiol.* 1995;75(5):378-382
- 2) Permanyer-Miralda G, Sagrista-Sauleda J, Soler-Soler J. Primary acute pericardial disease: a prospective series of 231 consecutive patients. *Am J Cardiol.* 1985;56(10):623-630
- 3) Permanyer-Miralda G. Acute pericardial disease: approach to the aetiologic diagnosis. *Heart* 2004;90(3):252-254
- 4) Gibbons RJ, Balady GJ, Bricker JT, et al. ACC/AHA 2002 guideline update for exercise testing: summary article: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Committee to Update the 1997 Exercise Testing Guidelines). *Circulation.* 2002 Oct 1;106(14):1883-92.

Thank you again for publishing our manuscript in the *World Journal of Clinical Cases*.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Tin T.D. Nguyen', with a stylized, flowing script.

Tin T.D. Nguyen, MD

Assad Movahed, MD,
Department of Cardiovascular Sciences,
East Carolina University,
Brody School of Medicine,
East Carolina Heart Institute,
115 Heart Drive, Mail Stop 651,
Greenville, North Carolina.
E-mail: movaheda@ecu.edu