Methodological Issues in Right-to-Left Shunt Detection in CADASIL Patients

To the Editor:

With regard to the article from Zigari et al,1 we would like to add some comments to the authors’ reply2 to our letter.3 The authors are very welcome to read our data that have indeed been published on an international, peer-reviewed journal.4 As to the second point of their reply, in our article we systematically referred to contrast enhanced transcranial Doppler diagnosis of right-to-left shunt instead of patent foramen ovale. We still believe that contrast enhanced transcranial Doppler is the most sensitive tool to detect right-to-left shunt, which is sustained by a patent foramen ovale in 95% of cases. Nevertheless, we think that if a relation is to be demonstrated between such a complex disease as CADASIL and interatrial septal abnormalities due to mutated Notch3-induced developmental disorders, these have at least to be documented anatomically. Otherwise, we could be left to suspect that 5% of the patients reported by Zicari et al1 had conditions other than a patent foramen ovale, such as a pulmonary arteriovenous malformation.

Disclosures

None.

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Stroke. 2009;40:e509; originally published online May 28, 2009;
doi: 10.1161/STROKEAHA.109.548982
Stroke is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
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Print ISSN: 0039-2499. Online ISSN: 1524-4628

The online version of this article, along with updated information and services, is located on the World Wide Web at:
http://stroke.ahajournals.org/content/40/7/e509

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