Article is available online at http://www.webio.hu/por/2005/11/3/0185

REPLY

First we thank Dr. Terracciano for his interest in our case report and for his remarks. I would like to clarify some of the issues brought up by Dr. Terracciano:

The patient had no history of heart disease, with only arterial hypertension in the background. The diagnosis of cardiomyopathy was not supported by either ECG or echocardiogram.

The talc was crude, used as body powder, and not the one used in modern cosmetic products. There is no doubt that talc as well as other sheet silicates are in extensive use in our era, yet we could not find any post mortem survey demonstrating incidental deposition of crystals in the lungs with foreign body reaction. ¹⁻² In this context we have to take in consideration the information indicating excessive use of baby powder and to link it with the very rare pathological findings.

Although uncommon, death from inhalation of baby powder containing talc has been reported in pediatric patients as can be found in the reference of our article. Severe respiratory distress caused by incidental talc inhalation has also been reported.³⁻⁸ Our case report presented death of the adult patient caused by talc inhalation.

As in all fields of medicine, the diagnosis is made by collaborating past history together with physical examination and laboratory results. Excessive use of body powder containing talc, together with the presence of birefringent crystals all over the lungs, with no other exposure to similar crystals leads to only one logical conclusion.

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Rumelia KOREN MD

Department of Pathology, Sackler School of Medicine, Tel Aviv University, Ramat Aviv, Tel Aviv, Israel