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LETTER TO THE EDITOR

# Reply to the Letter to the Editor ''Cardiac magnetic resonance imaging in cardiomyopathies that look alike''

## Resposta à Carta ao Editor «Ressonância magnética cardíaca nuclear em miocardiopatias parecidas»

We thank Drs. Yalcinkaya and Celik for their interest in our recently published manuscript in the section on Images in Cardiology.[1] While we wholeheartedly agree with their comments,[2] we wish to emphasize that constraints related to the type of submission precluded us from expounding more on the clinical characteristics emphasized by them in helping to distinguish between the various entities.

However, germane to the discussion is the understanding that the four entities that they highlight – hypertensive heart disease, amyloidosis, Fabry disease and hypertrophic cardiomyopathy – may be suspected even before a cardiac magnetic resonance (MR) study, the latter often confirming clinical suspicion[3]; other entities that may present with the phenotype of LV hypertrophy – Danon disease, Friedreich ataxia, the mucopolysaccharidoses and cardiac oxalosis – may be hard to suspect clinically and to the best of our knowledge studies involving large numbers of patients with specific cardiac MR findings do not exist.

We would all agree that clinical diagnosis of the entities reported by us involves all the components mentioned by Drs. Yalcinkaya and Celik; we did not wish to convey the message that cardiac MR should be performed at the expense of a comprehensive clinical assessment.

## References

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3. Seward JB, Casaclang-Verzosa G. Infiltrative cardiovascular diseases: cardiomyopathies that look alike. J Am Coll Cardiol. 2010;55:1769–79.

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