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Placental haemosiderosis

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Placental haemosiderosis: authors' reply

Sir.

We thank Dr Stanek¹ for his interest in our article.² His summary of our findings and conclusion are correct to a point but misleading. We did not comment on the presence of haemosiderin in the chorionic villi, which forms a large part of his letter, not because of his presumption that the iron stains were negative there but because, specifically, we indicated that we were examining the deposition of iron in the chorionic and/or basal plate and the membranes only.

In his first point, we did not say that an approach of routine histochemistry staining for iron is not useful. We did say, however, that it is not a useful marker for chronic placental separation and for adverse neonatal outcome. His statement that he believes that some amount of stainable iron can be seen in about half of placentas does not seem to be evidence-based, which is what we have rectified in our study.

We will not respond to his third point in detail as we did not examine the chorionic villi for iron staining, as noted earlier. However, we will point out that statements such as 'probably less frequently' and 'I regard ...' are without merit unless they can be substantiated by a reference or a body of experiment.

His conclusion that choriodecidual haemosiderin may not have a substantial clinical significance is correct but not because it is performed routinely. It is precisely that they were not performed routinely but in selected cases that clinical associations with choriodecidual haemosiderosis were found previously that we have refuted in this study.

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