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## Author's reply

We thank Dr. Balram Babu Rajanbabu and Dr. David Ray Andrews and their colleagues for their letter, and we appreciate the fact that they enjoyed our review. They are correct when stating that our account excludes origin of the left pulmonary artery from the descending aorta. This lesion is obviously associated with extrapericardial origin of the anomalous pulmonary artery, and the origin equally obviously is not from the ascending aorta. We are mystified, therefore, as to why the authors are of the opinion that we would try to group such a rare

malformation with our patients, since all had anomalous intrapericardial origin of a pulmonary artery from the pulmonary trunk. We are also mystified as to why the authors should consider it inappropriate to describe our patients as having intrapericardial origin of one pulmonary artery from the ascending aorta. They give no reason as to why this description is inaccurate, but rather confuse the situation by making comparison to extrapericardial origin of the left pulmonary artery from the descending aorta. Is not this akin to mixing

apples with oranges? As to the unique embryology, it is self-evident that lesions that have disparate morphological features are likely to be the consequent of different morphogenetic mechanisms.

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#### Conflicts of interest

There are no conflicts of interest.

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