Author's response to reviews

Title: Seasonal pattern of peptic ulcer hospitalizations: analysis of the hospital discharge data of the Emilia-Romagna region of Italy.

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Author's response to reviews: see over
Melissa Norton, MD  
Editor-in-Chief, BMC Gastroenterology

Manuscript: Seasonal pattern of peptic ulcer hospitalizations: analysis of the hospital discharge data of the Emilia-Romagna region of Italy.

Dear Dr. Norton,

I am pleased to resubmit the revised version of the above quoted manuscript (also the title has been partly changed, as suggested by the reviewers).
I wish to thank the three reviewers for their constructive criticisms and suggestions which helped us to significantly improve our work. Based on their comments, either the manuscript (approx. 900 words) and reference section (approx. 700 words) have been substantially shortened.
We hope this revised version will be suited to be accepted, but we are ready to proceed to further changes, along with further reviewers’ suggestions.

A detailed letter, indicating all the changes made (the manuscript has been rewritten) and all the answers to each reviewer’s note is enclosed.

Looking forward to hearing from you, at your convenience
My best personal regards
Roberto Manfredini

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BMC GASTROENTEROLOGY

Title: Seasonal pattern of peptic ulcer hospitalizations: analysis of the hospital discharge data of the Emilia-Romagna region of Italy.

General notes: We wish to thank the three reviewers for their constructive criticisms and suggestions which helped us to significantly improve our work. Based on their comments, either the manuscript (approx. 900 words) and reference section (approx. 700 words) have been substantially shortened.

Specific notes

Reviewer: Jin-Yong Kang

General considerations: the quite correct hypothesis that different causes of ulcer disease may have seasonal patterns has been discussed thoroughly (see Discussion and Conclusions).

Specific comments: we agree with the three points raised by this referee and changes to the text have been made accordingly (see revised version).

Reviewer: Brian Smith

General considerations: Many thanks for the kind words of appreciation.

Specific comments:
Major points
1) Agreed: The discussion has been re-organized, and condensed (both in the text and in the reference section). We checked and modified a couple of disconnects between the references, Table 1, and the text.
2) Agreed: The temporal pattern of NSAIDs use could be one possible causative reasons, but we have no regional or national data on this. The hypothesis that a seasonal variation in the risk of PUD hospitalization (late summer – early autumn, and winter) exists, and that different temporal patterns of specific causative agents may at least in part explain this, has been clearly stated in the Discussion and Conclusions sections.
3) Agreed: The conclusion section has been re-written.

Minor revisions:

The final manuscript has been checked for English language by a native language collaborator.
Reviewer: Reimar W Thomsen

General considerations: Many thanks for the kind words of appreciation.

Major revisions:
Title
1) and 2) Agreed. The title has been changed accordingly.

Abstract
3) Agreed.
4) Agreed. The term ‘fatal’ has been explained in the text (in-hospital mortality)
5) Agreed. The sentence has been modified accordingly.
6-7) Agreed. The abstract has been modified.

Main text

Introduction
8) Agreed. The sentence has been modified.
9) Agreed. The main results have been cited.
10) Agreed. We eliminated the term”major drawback”. The small size is only a potential limitation.

Subjects and methods:
11) Agreed. We explained in the text the limitations to the access of the database (to respect national and regional dispositions-by-law)
12) Agreed: we explained we have no information of any case prior to 1998. Only from this year the Region started up an electronic database.
13) Agreed. This has been our fault. The very first extraction of the data referred to either first and second diagnosis codes. Then, due to the limitations and the confusion effect, we cleaned-up the database limiting to first code only. The data presented refer to first diagnosis only population.
(PS the first extraction contained also other variables, e.g., orographic features such as sea level or hill/mountain. But we decided soon after to delete these informations, since we had no access to meteo data).
14) Agreed. It’s an error (see the previous explanation). Orographic features were first considered, then eliminated from the analysis.
15) Agreed. The suggestion is really very important, and we appreciated it! The text has been re-worded throughout, accordingly.

Discussion
16) The sentence was misspelled and confusing. It has been rephrased.
17) Agreed. It is evident that we considered only acute admissions (and not elective admissions). We eliminated that part of discussion, that was only confusing and not appropriate.