Author's response to reviews

Title: Assessment of vaccine candidates for the elderly: a review

Authors:

Renske Eilers (renske.eilers@rivm.nl)
Paul F.M. Krabbe (p.f.m.krabbe@umcg.nl)
Ted G.A. van Essen (G.A.vanEssen@umcutrecht.nl)
Anita Suijkerbuijk (Anita.suijkerbuijk@rivm.nl)
Alies van Lier (alies.van.lier@rivm.nl)
Hester E. de Melker (hester.de.melker@rivm.nl)

Version: 2 Date: 11 February 2013

Author's response to reviews: see over
Dear Dr. Jessica Sautter,

January the 17th, 2013

Enclosed please find the manuscript, ‘Assessment of vaccine candidates in elderly: a review’. I respectfully resubmit this revised paper to BMC Geriatrics in the hope that I fulfilled the concerns raised by the reviewers.

On behalf of all authors, I will provide a point-by-point response.

Reviewer Jessica Sauter

Table 1 is not necessary; the point could be presented more concisely in the text, with a note on where the data come from.

We agree with the comment that table is not necessary and therefore table one is removed and we adapted the paragraph ‘Burden of disease’ to explain the information that was presented in the table.

The conclusion that more research is needed surprises me. What do we still need to know? What kind of data do we need? How could we gather it?

We noticed that various aspects included in the model of Kimman could not be answered with the currently available literature, such as length of protection, optimal timing of vaccination and doses needed for the different infectious diseases. The pertussis vaccine is for example not specifically registered for persons 50 years and older. These aspects/questions were mentioned in the discussion and answers might be obtained by further research, observations. We deleted the sentence on ‘To that end, further research is needed’ since mentioning the questions are already given.

The organization of the manuscript was difficult to follow at times. Consider moving the “vaccine” section toward the end, after the pathogens, disease burdens, and financial outcomes have been discussed.

We find this a good suggestion; therefore we moved the section ‘Vaccine’ towards the end, after the section disease.
Reviewer Beatrix Grubeck-Loebenstein

Tables as well as figures should be self-explanatory. The legends should therefore be much more detailed. In the legend to Table 1 it is, for instance, unclear which patient group is defined as 100%. Would it be all patients admitted to ICU? Table 2 should be much more detailed. Firstly, it should be mentioned that mean direct/indirect costs presumably refer to one case. Secondly, it would be important to explain how direct and indirect costs are calculated. Table 3 should have a more detailed legend than just a summary. This table is also extremely overloaded and therefore difficult to read. Perhaps it would be best to split it into two parts.

In response to the comment of reviewer 1, table 1 is removed en the information is added in the text. We have tried to explain the data in more detail. Regarding table 2, the suggestions the reviewer makes, were added to the table; an explanation of how the direct and indirect costs were calculated. Also, it is mentioned that mean direct and indirect costs refer to one case. Regarding table 3; although we acknowledge that table 3 is extensive, we disagree with the suggestion to split the table in two parts. The objective of table 3 is to give an overview of the review; this is lost when the table is split in to parts. We have adapted the legend of table 3.

Direct and indirect costs should also be explained in the text under "Use and costs of health care". This has been added.

On p.10, two references to Fig. 2 are made. This should presumably be to Fig. 3? That is indeed correct, this has been changed.

The reference given in Fig. 2 should presumably be 38 instead of 37. The reference giving in Figure is 38 and that is the correct reference.
Editor

I agree with Reviewer #1 about inadequate presentation of Tables. Based on my own reading, it would be better if authors could provide more about their motivation of the study in the first two sections.

‘elderly’ is used as either a noun or an adjective word in the text, which is inconsistent. I suggest using it as an adjective word.
Also please spell all acronyms out at the first time. There are at least two places (one in abstract) that authors did not provide the full meaning of the acronyms.

*We hope that by the adjustments we made regarding the different tables, this concern is adequately addressed. We accept your suggesting to use elderly as an adjective word, the whole manuscript has been checked on the use of ‘elderly’ as an adjective. In addition, the manuscript is checked for acronyms to make sure that when they are used for the first time, the full meaning of the acronyms is given.*

Copyediting: After reading through your manuscript, we feel that the quality of written English needs to be improved before the manuscript can be considered further.

*We have asked a native speaker editor to look at the manuscript and we hope that the quality of the written English is adequately addressed.*

Structure: Please check the instructions for authors on the journal website to ensure that your manuscript follows the correct structure for this journal and article type.

*The manuscript has been checked according the instructions for authors and the necessary changes are made. A brief statement of what is being reported in the article was missing therefore this has been added. In addition, the text of the acknowledgements has been adjusted. Furthermore, an endnote list was added after the list of abbreviations and references were adjusted.*

Figure titles: All figures must have a figure title listed after the references in the manuscript file. The figure file should not include the title or number (e.g. Figure 1... etc.). The figures are numbered automatically in the order in which they are uploaded.

*This has been adjusted.*

Figure cropping: It is important for the final layout of the manuscript that the figures are cropped as closely as possible to minimise white space around the image.
This has been addressed.

We hope that the changes we have made are sufficient for you to consider the manuscript further for publication.

Sincerely,

Renske Eilers