Author's response to reviews

Title: Patan Hospital Experience In Treating Philadelphia Chromosome/BCR-ABL1 Positive Chronic Myeloid Leukemia Patients With Gleevec (Imatinib Mesylate); The First Generation Specific Tyrosine Kinase Inhibitor.

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Author's response to reviews: see over
To the editors:

We appreciate the thoughtful review of our article. We have made revisions to the manuscript accordingly, and these are described below.

Thank you for your time.

Sincerely,

Gyan Kayastha and Aaron Mansfield on behalf of all the authors

To the editors:

Formal ethical approval was not required at Patan Hospital for GIPAP to take effect. The hospital director at the time initiated this program at Patan Hospital, and the government approved it and has waived import taxes for Gleevec.

In regards to the journal style, we have again reviewed the journal style. We have made changes to the references so that all authors are listed instead of et al. With these changes we believe that our manuscript conforms to the journal style, and that our files are correctly formatted.

In response to referee one:

We were asked to shorten the introduction and focus on treatment of CML with Gleevec. We have significantly shortened the introduction and removed some of the historical information on CML in order to focus the introduction on the treatment of CML.

We were asked to focus on the value and importance of cooperation (through GIPAP) regarding treatment of our patients in the introduction and background. We have chosen to stress the value and importance of GIPAP to our patients by adding “GIPAP has enabled many patients to receive standard of care treatment that would otherwise be prohibitive due to cost in Nepal” to the last sentence of the discussion.

We realize that spleen was misspelled in the reference, and this has been corrected.

In response to referee two:

In the results section we now describe the timing of the cytogenetic testing.

In the background of the abstract we parenthetically include the location of the hospital.
The results section of the abstract now includes the two most common non-hematologic side effects observed.

As per above, we have already included the timing of cytogenetic testing for the patients who could afford it.