To the editor,

I am writing to you in order to ask for considering for publication the present original paper about the molecular investigation we conducted for an outbreak of HCV occurred in an Italian haemodialysis.

This paper was previously submitted to BMC Medicine but the editor has suggested to send to you the paper since has a specific interest for infectious diseases but not for general medicine. This present paper, which has been written according to the ORION 2007 statement for transparent reporting of outbreak reports and intervention studies of nosocomial infection, analyzes the mode of HCV transmission and evaluate the long term outcome of cluster of 13 end stage renal diseases subjects who got infected with HCV between June and September 2005.

As you can see reading the paper, our data are largely consistent with the most recent published evidence emphasizing that, in countries with high healthcare standards, haemodialysis is its-self a safe procedure. Nevertheless haemodialysed subjects are more exposed than others to blood-borne infections as the result of inaccuracy and/or mishandling in the application of standard measures, in particular lacks in safe injection practice including multi-vials drugs shearing.

As additional results, we were also able to define the long term outcome of 12 out of the 13 infected subjects and, although our data are limited, we found that end stage renal diseases patients do not seem to be more prone that other
subjects to chronic infection nor do they seem to have a poorer response to interferon therapy.

In conclusion we believe that this paper is relevant for publication because we provide robust molecular evidence to confirm the outbreak and we were able to define the precise mode of infection transmission of the majority of the infected subjects. In this way we gave additional evidence of the critical role of correct application of standard measures to prevent HCV infection in haemodialysis unit. Moreover we also defined clinical attack rate and clinical course of a group of end stage renal disease subjects newly infected with HCV, which may be useful to better understand the natural history of HCV infection in such as patients.

Regards

Simone Lanini