Reviewer's report

Title: Galactomannan testing of bronchoalveolar lavage fluid is useful for diagnosis of invasive pulmonary aspergillosis in hematology patients

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Reviewer: Alessandro Pasqualotto

Reviewer's report:

a) Major comments
- The authors have done a good job in reviewing the article, which has been markedly improved in quality. My main concern however is that there is only one case of Aspergillus infection in the proven/probable group. The other 9 culture-negative cases represent invasive mould diseases. Galactomannan was negative in the serum for many of these patients.

- The recent paper by Johan Maertens should be included as discussed (Clin Infect Dis 2009; 49:1688-93).

- Why was a single 0.7 serum result considered evidence of Aspergillus infection? The authors did not repeat positive galactomannan results in the serum, which is probably wrong (the test has a limited positive predictive value so every positive test should be confirmed). Also, why was only the highest GM value considered in the serum? What if a patient had 9 negative and one positive GM result, with the positive test being just above the cut-off?

- The authors conclude that BAL GM testing is safe although safety was not evaluated in the study. Also, their conclusion on '... A delay in the performance of bronchoscopy of up to 6 days ... did not appear to affect the performance ...' is also probably wrong, since that has not been studied.

b) Minor comments
- When [in the conclusion] authors say that '...a higher cut-off should is necessary', it should be clear that a comparison is being made with serum samples.