Reviewer's report

**Title:** Discrepancy between Effects of Carbapenems and Flomoxef in Treating Nosocomial Hemodialysis Access-related Bacteremia Secondary to Extended Spectrum Beta-lactamase Producing Klebsiella pneumoniae in Patients on Maintenance Hemodialysis

**Version:** 2 **Date:** 29 February 2012

**Reviewer:** Giovanni Battista Orsi

**Reviewer’s report:**

Major comments
The authors present their retrospective study comparing the clinical outcomes of patients treated with either flomoxef or carbapenems in hemodialysis patients with access related ESBL-Klebsiella pneumoniae bacteremia.

In my opinion the study holds one strong point, as it was carried out on a specific population (hemodialysis patients), suggesting that carbapenems rather than flomoxef should be first choice antibiotics in case of serious infections with enterobacteriaceae. However it must be considered that the use of cephamycins for these serious infections by gram-negatives is not universal but restricted to some countries, limiting the general interest.

However I am concerned about some aspects of the present paper, and authors should consider carefully the points which have been highlighted.
The manuscript needs to be shortened, particularly the introduction, the discussion and one table appears redundant.

Major compulsory revisions

**ABSTRACT**
Results, last paragraph: the results of multivariate analysis should be presented all together.

**INTRODUCTION**
2nd paragraph: “Risk factorsŠsetting²: the English needs to be improved;

3rd paragraph: The use of cephamycins is not universal but limited in some countries;

**MATERIALS AND METHODS**
Why the study included 57 patients but the analysis and conclusions were carried out only on 42 (excluding patients with fistula and grafts)?
RESULTS
Prior use of antibiotics (i.e. 3rd generation cephalosporins) may represent an epidemiological bias and needs to be commented in the discussion; Data on the use of Flomoxef and carbapenems was not reported on both Tables 1 and 2; As underlined previously, it is not clear why the study included 57 patients (42 HD, 7 with fistula and 8 with grafts) but the analysis and conclusions were carried out only on 42 HD patients (excluding patients with fistula and grafts)?

Last paragraph: the results of multivariate analysis should be presented all together.

DISCUSSION
It is too long, it may be shortened;

TABLES AND FIGURES
Table 3: may be eliminated (redundant).

1. the question posed by the authors is well defined
2. the methods are not completely clear and need to be better explained?
3. the data are sound
4. the manuscript adhere to the relevant standards for reporting and data deposition
5. the discussion and conclusions are not well balanced
6. limitations of the work are not sufficiently stated?
7. the authors clearly acknowledge any work upon which they are building, both published and unpublished
8. Do the title and abstract accurately convey what has been found
9. the writing should be improved