Reviewer's report

Title: Comparison between bacteremia caused by carbapenem resistant Acinetobacter baumannii and Acinetobacter nosocomialis

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Reviewer: Lenie Dijkshoorn

Reviewer's report:

Minor revision. See comments.

Review BMC MS: 7273645318745088

Research article

Comparison between bacteremia caused by carbapenem resistant Acinetobacter baumannii and Acinetobacter nosocomialis

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BMC Infectious Diseases

Background, P5:

Line 2: the two cited papers do not seem appropriate as they are research papers, while one or 2 comprehensive reviews should be cited instead, e.g. no. 12 (Peleg et al.).

Line 3-4: so many (i.e. 9) cited references is not necessary to make the point. Reduce number to those that are really relevant and focused on the statement: worldwide and in the Asia-Pacific region.

Methods, P7:

Line 9-11: Reference 29 of the PFGE protocol used refers to the original paper of Seifert et al. That paper must be cited as a highly standardized reference methods which is well-known, whereas ref 29 is not. (This form of self-citation should be avoided.) Furthermore, the text should give a little more info, (e.g. Apal as restriction enzyme, Machine, programme, and software + settings for grouping) to give readers some insight.

Results, P11:

Line 10: PFGE should be either included in the paper itself, or the result should be summarized as 'data not shown'. If included in the paper itself, then the criteria for type allocation must be given (e.g. in legends of the figure) by referring to reference 29 which specifies that. It is a pity and limitation that not more strains were typed because it may well be that during the study period there have been clusters of cross-infection. Nevertheless, there is a certain degree of diversity and the occurrence of CRAB or CRAN cannot be attributed to the spread of a single or a few epidemic strains.
Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.