Author's response to reviews

Title: Seroepidemiology of human enterovirus71 and coxsackievirusA16 among children in Guangdong province, China

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Author's response to reviews: see over
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Dear editors:

Thank you for your kind reply on our manuscript. Enclosed is the revised manuscript to be submitted for consideration for publication in BMC Infectious Diseases. The manuscript is entitled “Seroepidemiology of human enterovirus71 and coxsackievirusA16 among children in Guangdong province, China”. All the authors have contributed to this work and agreed to the content. This manuscript has not been sent or considered to any other journals for publication.

And in this revised version, necessary changes have been made as required in your letter.

1# Requesting consent statement:
Please state in the Methods section whether written informed consent for participation in the study was obtained from participants or, where participants are children, a parent or guardian.

Reply: The ethics statement was added in the Methods section. The details are as follows. The study was approved by the ethics committee of the Guangdong Provincial Center for Disease Control and Prevention, and was in compliance with the Helsinki Declaration. Written informed consent was obtained from the parents or legal guardians.

Hand, foot and mouth disease (HFMD) is a common pediatric illness. Mainly induced by the Enterovirus 71 and Coxsackievirus A 16 infections, the frequently occurred HFMD outbreaks have become a serious public health problem in Southeast Asia. Currently, only a few studies have investigated the human immunity to HFMD in China. In this study, we conducted a cohort study in Guangdong province, China. Children less than 10 years old were enrolled. The levels of EV71 and CA16 specific antibodies before, during and shortly after the 2008 large outbreak of HFMD were evaluated. The seroprevalence data showed a continuous circulation of EV71 and CA16 in Guangdong province China in 2007-2009. The low positive rate in 2009 correlated well with the unprecedented outbreak of HFMD in 2010. Age related increase of seroprevalence was identified in 1-3 years old children for
EV71 and in 1-5 years old children for CA16 in Guangdong province. Besides, increased trends of EV71 and CA16 antibody titers were also observed. All of the above findings indicated common infections for these age groups. And they should clearly be at the top of the priority in periodical seroprevalence survey and future vaccination campaign.

Your consideration is greatly appreciated.

Sincerely yours,
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