Author's response to reviews

Title: Asymptomatic oral yeast carriage and antifungal susceptibility profile of HIV-infected patients in Kunming, Yunnan Province of China

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Author's response to reviews: see over
December 24, 2012

Dear Editor,

Thank you very much for your help in handling our manuscript (MS: 1521775508673229 - Asymptomatic oral yeast carriage and antifungal susceptibility profile of HIV-infected patients in Kunming, Yunnan Province of China). We have revised the manuscript according to the comments of the two reviewers and your editorial comments. For your quick reference, we marked all the revisions in red throughout the entire text. In details, we provided a point-by-point response to the concerns raised in the reviewers’ comments as follows.

For your editorial comments:

- We have checked the style of the revised manuscript and ensure it conforms to the latest style as appeared in the most recently published papers on your journal.

For Reviewer BITAM Idir

the paper proposed for BMC Infectious Diseases by Wen-Ying Chen and al with the title Asymptomatic oral yeast carriage and antifungal susceptibility profile of HIV-infected patients in Kunming, Yunnan Province of China

The article is well written, the title fits perfectly with the Findings and purpose found in the article, and which are suitable for publication in BMC Infectious Diseases, such as case report because I see no originality in this work, there are several studies published in the field as:


- We have added two of the four references (Jeddy et al. 2011; Junqueira et al. 2012) listed by this reviewer in the revised version. We humbly thought that the other two suggested references seemed to be irrelevant to the main focus of our text.
I recommend to reduce the article and reduce the number of table into two tables summarizing

- We have removed the original Tables 2 and 4 from the text and presented them as the additional files.

Reference 10 is incomplete,

- We have checked this reference and it is correct.

Level of interest: An article of importance in its field
Quality of written English: Acceptable
Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

- No change is needed.

For Reviewer Astrid Mayr
Minor Essential Revisions
- there are some typographical errors in the manuscript, e.g. Saccharo cerivisiae should read as Saccharomyces cerevisiae.

- We have corrected this error.

- Candida should be written italic throughout the manuscript, e.g. References.

- We have corrected this error.

- the correct name is CLSI instead of NCCLS (since 2005). Refer to Reference-list.

- We have corrected this error.

Major Compulsory Revisions
- if the authors refer to the CLSI-Standard M27-2, why was the azoles-MIC defined as the lowest concentration that inhibited approximately 50% of growth and not 80%?

- According to our experience, it is not possible to tell the difference between 50% and 80% inhibition by eye when using the microdilution method. We have revised the text to mention that: “The MIC for azole was defined as the lowest concentration that sharply decreases the growth relative to the control, as it is not possible to distinguish the difference between 50% and 80% inhibition by eye when using the microdilution method” (Page 8).
-Discussion: the interesting data found in samples of healthy individuals are not discussed/explained.

- We have added some sentences in the revised version to discuss that: “Among the three healthy individuals with colonization of multiple yeast species, one with *C. albicans* and *C. tropicalis* and two with *C. albicans* and *C. glabrata*, it would be interesting to have follow-up examinations for these individuals. The exact reason for the presence of *C. lusitaniae* and *C. guilliermondii* in healthy donors but not in any HIV-infected patients remained elusive.” (Pages 12-13).

Discretionary Revisions
For prospective identification of yeasts, the additional application of updated methods, e.g. techniques, which provide splitting up of *Candida parapsilosis*, *C. metapsilosis* and *orthopsilosis* is recommended. This would be of interest, because a difference in clinical relevance between meta- and orthopsilosis is given (Gomez-Lopez et al., AAC, 2008). Furthermore differences regarding susceptibility between *C. parapsilosis*, meta- and orthopsilosis is given. This issue is also important for discrimination of *C. albicans* and dubliniensis. A follow-up study regarding the number of infections due to colonization in this patients would be interesting.

- We thank the reviewer for these helpful comments. We will perform the suggested analysis in the future and these data may be published separately, as the current study is focused on the asymptomatic oral yeast carriage and antifungal susceptibility profile of HIV-infected patients. We have included a paragraph in the revised text to mention this important issue: “For prospective identification of yeasts, additional application of updated methods, e.g. techniques which provide splitting up of *Candida parapsilosis*, *C. metapsilosis*, *C. orthopsilosis* and other related species, as well as to recognize potential new species will be employed in future studies. This would be of interest because there is a species specific difference in clinical relevance between Candida species, e.g. between *C. metapsilosis* and *C. orthopsilosis* [30]. Moreover, it would be rewarding to have a long-term surveillance program for monitoring the dynamics of the species in colonized HIV-infected patients and healthy individuals.” (Page 13)

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

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

- No change is needed.

We hope that following these changes, you and the reviewers will now find our
paper in an appropriate format for publication in *BMC Infectious Diseases*.

Sincerely yours,

Yu-ye Li, Yong-Gang Yao and co-authors