Reviewer’s report

Title: Cryptosporidiosis and Isosporiasis among HIV-positive individuals in South Ethiopia: a cross sectional study

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Reviewer: Andargachew Mulu

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It is well known that HAART and cotrimoxazole prophylaxis showed a tendency in reducing the overall incidence of opportunistic infections world wide.

Nevertheless, the report by Girma et al from the southern part of Ethiopia showed the high rate of cryptosporidium infection irrespective of HAART initiation, HAART duration and CD4 T cell count. Here first none of the patients was on HAART. Without the presence of at least one PI, it is very difficult to say HAART. The conclusion of the presence of high and low burden of cryptosporidium and I. belli infection, respectively among HIV infected individuals irrespective of ART is a premature conclusion and unlike various local and regional report and clinical observation in the country.

The denominator in table one is not specified and difficult to compare the percentage. However, it is apparent that the rate of cryptosporidium infection among patients before and after the initiation of ART is similar. How it could be explained? The time point for CD4 count determination (table 1) is not defined: Was it a baseline when the patients was enrolled in HIV/AIDS care clinic or was it during patients follow up before or after ART or during the time of stool examination?

In general the MS was not seen by the 2 senior last authors and little else can be extrapolated and the result does not seem “scientifically” interesting enough to warrant publication in a basic infectiology journal.

Level of interest: An article of insufficient interest to warrant publication in a scientific/medical journal

Quality of written English: Not suitable for publication unless extensively edited

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

Declaration of competing interests:

I do not have any competing interest