Author’s response to reviews

Title: Severe Clostridium difficile infection complicated by Carbapenemase producing Klebsiella pneumoniae bloodstream infection.

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Author’s response to reviews: see over
Dear Editor,

I am pleased to submit a case report entitled "Severe Clostridium difficile infection complicated by Carbapenemase producing-Klebsiella pneumoniae bloodstream infection" for consideration for publication in BMC Infectious Diseases. The case reported led us to speculate about a possible link between two concerning healthcare associated emergences: severe C. difficile infection (CDI) and carbapenemase producing-K. pneumoniae. Intestinal inflammatory injury induced by CDI and exposure to an antimicrobial regimen able to modify the intestinal flora could have played a crucial role in developing a bloodstream infection induced by carbapenemase producing -K. pneumoniae.

We already described a putative correlation between severe CDI and Candida bloodstream infection [1]. Fidaxomicin, characterized by a narrow antimicrobial spectrum almost limited to C. difficile, by preserving intestinal flora could reduce predisposition to health-care bloodstream infection secondary to severe CDI.

This manuscript has not been published yet and it is not under consideration for publication elsewhere.

We do not have any conflict of interest to disclose.

Thank you for your consideration!

Sincerely,

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