Reviewer's report

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

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Reviewer: Jonathan Chen

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Giuliano et al reported an interesting clinical case of Clostridium difficile and Carbapenemase producing Klebsiella pneumoniae bloodstream co-infection.

This report demonstrated a clinical case that the C. difficile treatment could be complicated by other nosocomial bloodstream infections. The author suggested that the presence of nosocomial bloodstream infection could provide certain level of complications to the C. difficile treatment. However, no experiment proof was provided to support their theory.

The report has a few major shortcomings which I would suggest is rectified prior to acceptance for publication.

Major Compulsory Revisions

1. Are there any other CD and CRE co-infected cases found in the authors' hospital? If yes, what are their biological responses to the treatment?

2. Is there any other pathogens, e.g. VRE or even VISA that can be identified from the stool of the patient after the vancomycin treatment? As these kind of pathogens may also complicate the C. difficile treatment too.

3. The ribotype and toxin-producing ability of the C. difficile should also be addressed as these factors could also affect the patient treatment.

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.

Declaration of competing interests:

I declare that I have no competing interests