Author's response to reviews

Title: Evaluation of an early step-down strategy from IV anidulafungin to oral azole therapy for the treatment of candidemia and other forms of invasive candidiasis: results from an open-label trial

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Author's response to reviews: see over
December 2013

Dear Dr Harris

RE: Evaluation of an Early Step-Down Strategy from Intravenous Anidulafungin to Oral Azole Therapy for the Treatment of Candidemia and Other Forms of Invasive Candidiasis: Results from an Open-label Trial

Following your letter of October 18, 2013, we have compiled a response to the journal editor and the peer reviewers, and have revised the manuscript accordingly. My co-authors and I would be very grateful if you would again consider this manuscript for publication in BMC Infectious Diseases.

We look forward to hearing from you.

Yours faithfully

Robert Swanson, PhD
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<tr>
<th>Comments</th>
<th>Response</th>
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<td><strong>Editor</strong></td>
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<td>1. Please name the specific ethics committees that approved your trial within your methods section.</td>
<td>This information has not been included in the methods section due to space limitations; however, a list of the ethics committees which approved the study has been included with this resubmission.</td>
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<td><strong>Reviewer 1</strong></td>
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<td>1. The revisions look good.</td>
<td>Thank you for your feedback.</td>
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<td><strong>Reviewer 2</strong></td>
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<td>1. In the author's response to an initial request that they consider providing Candida susceptibility data, they indicate that &quot;Susceptibilities were confirmed for all Candida isolates obtained from this study.&quot; Does this author statement mean that all Candida isolates were susceptible to all agents used, or merely that susceptibility testing was performed on all isolates? I did not see this clarification addressed in the revision, unless I am missing it. I still contend that it is warranted for the authors to explicitly address the issue of Candida susceptibility verification in the paper, and also provide the actual susceptibility results obtained. Even a general comment (if indeed true), along the lines of &quot;....all isolates were documented susceptible to the agents utilized...&quot; would suffice. In support of this contention, the authors state in their</td>
<td>Thank you for your feedback. <strong>Methods, Page 9.</strong> The following text has been included in the manuscript:  ‘Susceptibility testing was conducted on all baseline isolates using the Clinical Laboratory Standards Institute (CLSI) M27 microbroth dilution method and M27-A3 breakpoints.’  <strong>Results, Page 13.</strong> The following text has been included in the manuscript:  ‘All but six baseline isolates were susceptible to anidulafungin and only one of the patients with a resistant baseline pathogen was a treatment failure. All baseline isolates were documented susceptible to the oral agents used except for three patients receiving oral fluconazole and four patients receiving oral voriconazole; there were no treatment failures in these cases.’</td>
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Background, paragraph 4, lines 6-9 that the most recent guidelines (ESCMID) endorse oral switch therapy if the isolate is susceptible to the agent being switched to.