Author's response to reviews

Title: Deep neck infection complicating lymphadenitis caused by Streptococcus intermedius in an immunocompetent child

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Author's response to reviews: see over
Dear Editors,

I am sending the revised version of the manuscript “Deep neck infection complicating lymphadenitis caused by Streptococcus intermedius in an immunocompetent child” submitted to BMC - Infectious Disease.

We have carefully read the helpful comments of the reviewers, Drs. Hideaki Nagamune and Robert A Whiley, and the text has been modified accordingly to the reviewers’ suggestions.

Page and line numbers have been provided for each modification performed.

On behalf of my colleagues, I would like to express our appreciation for the attention given to our manuscript.

We sincerely hope that, in its present form, the paper will be judged acceptable for publication in BMC - Infectious Disease.

We look forward to hearing from you for the final decision.

With my personal best regards,

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Replies to reviewers

REVIEWER dr Robert A Whiley

General comments

This case report is clearly presented and is a nice example of thorough microbiological investigation in a clinical context leading to a successful outcome. It is also an interesting case example involving the 'hidden pathogen' Streptococcus intermedius which may well be underappreciated in the medical literature. This report is to be welcomed for that reason too. I cannot comment on the clinical treatment regimes carried out but from the point of view of the microbiology the authors have investigated this organism fully using the most up-to-date approaches including cytotoxin gene detection to confirm the identity of the bacterium.

Specific comments, questions, suggestions:

1. Clarify or use an alternative for the expression 'work-up' in the conclusion to the abstract on page 2.
R. We have replaced the term “work-up” with “investigation” in the Abstract (page 2, line 15) and also in the Discussion (page 6, line 17).

2. Omit the word 'infection' from the first sentence of the Background on page 3.
R. The term “infection” has been deleted, as suggested (page 3).

3. Alter the term 'Streptococcus viridans' on line 2 of paragraph 2 on page 7 as this is not a valid species name - this should be changed to 'viridans streptococci'.
R. We apologize for this error. The text has been corrected (page 8; line 4).
4. I do not understand the first sentence on page 8 starting, 'Contrarily treatment ....etc' This is very unclear and the authors must rephrase this (if I knew exactly what they meant then I might have suggested something !).

R. We have clarified the meaning of the confusing sentence (see page 8, lines 6 to 9 of the revised manuscript).

5. Lastly I was interested that the authors do not acknowledge the person(s) who carried out the 16SrDNA sequence analysis and the intermedilysin gene PCR which form a significant part of the investigation and make it 'cutting edge'. Was there a good reason for this?

R. Both molecular analysis were carried out by M. Sanguinetti, who is one of the authors of this manuscript.

REVIEWER Dr. Hideaki Nagamune

General comments
This paper is an interesting case report indicating the relationship between deep neck infection and S. intermedius. Therefore, the present case is worth publishing in this journal after minor revise on the comments below

Specific comments, questions, suggestions:

1. p3, lines14-15: Over the past three months, …repeated orthodontic procedures.? If clinical information such as on dental caries or periodontitis during the orthodontic procedures is available, addition of such clinical history is informative for readers.

R. We have clarified that the child had undergone repeated orthodontic procedures which were associated with some degree of gingivitis, but that parents could not recall whether or not any treatment had been prescribed for the gingival lesions (page 3, lines 15 to 17).

2. p6, lines1-2: The presence of …, which has been previously described [6]? Because authors identified the isolated strain as S. intermedius according to the Whiley’s scheme, the explanation of PCR result of the ily gene using the PCR primer set which can specifically amplify the gene in the species of S. anginosus group streptococci published previously [6] is
right and there is no essential problem in the main plot of this paper. However, confusing non-specific amplification was occasionally found in PCR using the primer set in the other streptococcal group previously (Goto, T. et al., J. Med. Microbiol., 51, 178-186, 2002). So, use of a strictly specific primer set introduced in the above paper is recommended for the improvement of accuracy of molecular identification of S. intermedius or confirmation of the ily gene. Some comment on the recommendation of stricter PCR system for identification of S. intermedius in future studies should be included in Discussion.

R. Although no non-specific amplification was found in our case, we have added comments on this aspect in the Discussion (pages 6 and 7, respectively lines 27 to 28 and 1 to 8) and the article by Goto et al. has been cited (reference no. 10).