Author's response to reviews

Title: Successful treatment of two postoperative endophthalmitis cases due to Aspergillus flavus and Scopulariopsis spp. with caspofungin

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To the editor;

You may find our responses to the reviewer in the following section.

1. The first sentence is changed according to the recommendation of the reviewer. One new reference (reference 4) which is a recent study is added to the introduction section.

2. In the second reference, the study was performed in Florida (the incidence of postoperative fungal endophthalmitis is 8.6%) which is similar to the environment in India, the country where the study in reference 3 (the incidence of postoperative fungal endophthalmitis is 18.6%) was performed. So, these differences can not be only explained by the local tropical habitat of the study population. In this point what important is the hospital’s infection control policies. It is known that, postoperative fungal endophthalmitis is generally secondary to contaminated intraocular irrigation fluids, air conditioning systems and cluster infections during construction activities in hospitals. In centers with strict infection control policies, the rate of hospital-acquired infections is accepted to be low. These differences between USA and India may be better explained in this way.

3. It is known that Aspergillus flavus and Scopulariopsis spp. are resistant to fluconazole. So this drug was not considered as an alternative to amphotericin B. According to the practice guidelines for diseases caused by Aspergillus spp. published by Infectious Diseases Society of America, the first choice in medical treatment of non-candidal fungal endophtalmitis is systemic and intravitreal amphotericin-B (reference 31). As we are lacking sufficient clinical data on the efficacy of new antifungal agents (voriconazole and caspofungin), we considered amphotericin-B, a conventional approach, as the first step of the treatment. We changed the therapy due to resistance problem. The unique nature of our treatment lies in the management of fungal endophtalmitis cases by caspofungin, a new antifungal agent. This aspect adds value to the literature.

4. In case one; second sentence was changed in this way “He underwent an operation due to colon cancer 4 years before cataract surgery and received chemotherapy for 1 year”.

5. In case one, a new sentence indicating the patients’ diabetes status was added.

6. Anterior chamber and intavitreal administration of antibiotic and antifungal drugs had been performed preoperatively. Peroperative antibiotic and antifungal drugs were given only into the anterior chamber. Thank you for your attention so we could correct this misunderstanding as follows: “Endophthalmitis was suspected and anterior chamber fluid and vitreous examples were cultured preoperatively. Amphotericin-B (5µg/0.1cc) and cefuroxime (1mg/0.1cc) were administered into the anterior chamber while amphotericin-B (10µg/0.1cc), amikacine (0.4mg/0.1cc) and vancomycin (1mg/0.1cc) were given intravitreally. Despite this treatment, biomicroscopic and clinical appearance continued to deteriorate and IOL and capsular remnants were removed with anterior vitrectomy. Anterior chamber fluid, and vitreous examples were cultured preoperatively, IOL was also cultured. Amphotericin-B (5µg/0.1cc) and cefuroxime (1mg/0.1cc) were administered into the anterior chamber”.

7. In case two; the patient underwent gastrectomy operation 5 years ago and had received oral supplementation (with high protein content) before the cataract surgery. The patient had nausea and vomiting as gastroesophageal symptoms. These explanations are added to the text.

8. SMD (senile macular degeneration) is changed as “age related macular degeneration”.
9. Conclusion; the incidence of fungal endophtalmitis is corrected as in the background section.
10. References; reference 1 is corrected.
11. The legend for figure 1 is changed as “The biomicroscopic image of endophthalmitis due to Aspergillus flavus in case 1”.
12. Acknowledgement section is added to the text.
13. We have already used a spell checker provided by Windows.

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