Reviewer’s report

Title: Use of a T cell interferon gamma release assay in the investigation for suspected active tuberculosis in a low prevalence area

Version: 1 Date: 19 January 2009

Reviewer: Kazue Higuchi

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Major Compulsory Revisions

The manuscript by Winqvist N., et al. is on the evaluation of QuantiFERON-TB Gold in diagnosing active TB in Sweden. They recruited patients with and without active TB, and obtained unsatisfactory positive predictive value (PPV) and negative predictive value (NPV). However, PPV for extrapulmonary TB was high.

Major Points:

In Study population, patients, who were clinically suspected by an expert physician, and responded to anti-tuberculosis treatment, were included in TB cases. However, the definition of TB cases should be based on results of microbiological tests. Therefore, it is better to divide TB cases into two groups; 1) TB cases based on microbiological tests, 2) TB cases based on an expert physician. And compare PPV and NPV in each group.

Minor points

1. In page 7, line 1, what is 6 in “>0.35 IU6/ml”? It seems to be unnecessary.

2. The authors use both INF-# and IFN-# for interferon-gamma. One abbreviation should be used. IFN-# is used commonly. Thus, change INF-# (page 6, line 22; page 7, lines 1, 2 and 3) to IFN-##

3. In Table 3a, use periods, not comma, for numerical numbers of odds ratios, 95% CI intervals, and p-values.

4. In Table 2b, Negative predictive value of QFT-G seems to be 84.3%. Please recalculate it.

5. The commercial name of ELISPOT assay is T-SPOT®.TB, not T.spot-TB.

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.