Author's response to reviews

Title: Abscess of adrenal gland caused by disseminated subacute Nocardia farcinata pneumonia. A case report and mini-review of the literature

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

Thank you very much for last email with the helpful comments of the reviewers. As you can see in the attachment, we have implemented the suggested changes and gave a point-by-point response to the concerns. We are looking forward to hearing from you soon.

Sincerely yours,

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Point-by-point response to the concerns

Reviewer 1:

Minor Essential Revisions

Page 3, line 14: What do they mean by “pneumonic effects”?  
→ Changed to pneumonic inflammatory effects

Page 4, line 8: Cranial MRI, should be “MRI of the brain.  
→ changed

Reviewer 2:

Major Compulsory Revisions:

1) p 2 line 17 Meaning of “beginning lack of concentration” is unclear.  
→ changed into “increasing weakness of concentration”

2) p 2 line 22 Verb tense is inconsistent with rest of paragraph.  
→ changed

3) p 3 line 4 Spelling of gentamicin and ceftriaxone is incorrect.  
→ changed to “initial examination”

4) p 3 line 6 Meaning of “First examination” is unclear.  
→ changed to “initial examination”

5) p 3 line 14 Do you mean “bronchopulmonary”?  
→ changed

6) p. 3 line 18 Results of hormone level testing are not presented.  
→ “Metanephrine- and aldosterone-levels in collected urine and dexamethasone suppression tests were at a physiologic level”

7) p 3 line 23 Results of pathologic analysis of adrenal tissue is not presented.  
→ Results are presented on page 4 line 10

8) p 4 line 4 “Beaded” Gram-positive rods more accurately describes the organisms in the photograph and is suggestive of Nocardia species.  
→ changed

9) p 4 line 5 Insufficient information is provided concerning the identification of the isolate. How many bases were sequenced? What was the percent similarity of the sequence of the isolate with the type strain of N. farcinica?  
→ required informations were added “Few days later N. farcinica was identified via sequencing of the eubakterial 16S rRNA using polymerase chain reaction (PCR) as described at Weisburg et al.[1] Both strands of the ~500 bp PCR product were sequenced using the BigDye Terminator Cycle Sequencing Kit (Applied Biosystems, USA), and analysed on an ABI PRISM 310 Genetic Analyser (Applied Biosystems, USA). The sequence shows homology over 99.9% to the 16s rRNA gene of N. farcinica available at the National Center for Biotechnology Information (www.ncbi.nlm.nih.gov).”
10) p 5 line 11 Data on cases of pulmonary N. farcinica infection in the U.S. is from 1976 – much too old.
   →deleted

11) p 5 line 20 Change “possible” to “possibly”
   →changed

12) p 5 line 23 The reference describes patients in Japan, the text should state this or this information should be deleted. It is not relevant to the case presented.
   →Changed into “A large Japanese analysis showed…”

13) p 5 line 25 State that acquisition of Nocardia through the skin is usually the result of inoculation through traumatic injury.
   →added

14) p 6 line 8 “Determination of the IDENTIFICATION of N. species…”
   →changed

15) p. 6 line 8 Molecular identification of Nocardia species is the most reliable method for identification.
   →added

16) p 6 line 16 Delete “especially”
   →deleted

17) p 6 line 23 spelling of amikacin
   →changed

18) p 6 line 24 Give a reference for the use of third generation cephalosporin for CNS infections.
   →added

19) p 6 line 25 Change “intravenous” to “intravenously”.
   →changed

20) p 6 line 26 Meaning of “reserve antibiotic” is unclear.
   → An alternative antibiotic drug for resistant bacteria is linezolid