Reviewer's report

Title: Neutralizing antibodies explain the poor clinical response to Interferon beta in a small proportion of patients with Multiple Sclerosis: a retrospective study

Version: 1 Date: 19 April 2009

Reviewer: joel oger

Reviewer's report:

Major compulsory revisions;
The definition of groups A and B can be overlapping. e.g.:
- A patient having disease progression due to a relapse lasting at time of 2 consecutive visits (confirmed progression) or having 2 relapses at times of visits can either be segregated to group A or B.
- Further a patient with last exam during relapse, if there is no further exam could be considered non progressor (group A), if there is a confirmatory exam showing increased EDSS could be put in group B.

It is necessary to make sure all patients had a "confirmatory exam" and review the numbers according to this. It is also necessary to discuss the clinical difference between the groups A and B more extensively in relation with the mechanism of action of INF evaluating effect on relapse, effect on progression and effect of NAbs.

Another major criticism: Please detail for this reviewer the statistical method used to get significant differences in table 1 All the differences are significant...was Bonferoni correction used? If this is really significant, what are the consequences for the whole selection process. Does that reflects a bias?

Two criticisms concerning NABs:
Congratulation for using TRUs and the Kawade correction. The notion of high and low NABs is introduced in the techniques but not in the results. Is this relevant? Is the limit resting on anything? Or arbitrary?

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:

No competing interests