Reviewer's report

Title: Varicella-zoster virus infections in immunocompromised patients - a single centre 6-years analysis

Version: 2 Date: 20 December 2010

Reviewer: Peter Wutzler

Reviewer's report:

- Major Compulsory Revisions

1. Results: With regard to the patient characteristics (Table 1) and the case report No. 9, the question arises whether other causes for the hospitalisation of the 119 children than symptomatic VZV infections were relevant (e.g. exposition to varicella.

2. Case report No. 10 / Legend Fig 1: “48 h after the initiation of antiviral treatment, acyclovir has been replaced by cidofovir.” In table 1, the duration of antiviral treatment was stated as 9 days. Do you assume an effective drug level over this period due to the long half life of cidofovir or was ACV continued?

3. Case report No. 10: The rationale of cidofovir treatment is weak. Drug-resistant VZV strains are being isolated from immunocompromised patients following long-term acyclovir therapy, particularly from patients with chronic skin lesions. As resistance is clearly linked to long-term ACV exposure, it is unlikely that within 48 hours an ACV-resistant virus strain emerges. This aspect should be discussed.

4. Case reports No. 12, 13: Why was the ACV treatment stopped after 3 days (Pat. No. 12) and 4 days (Pat. No. 13), respectively?

5. Discussion: Is the term “preemptive therapy” applicable? It is usually used for treatment initiation before a symptomatic disease occurs and implicates an indicator/marker that predicts the subsequent clinical disease. Exposition to varicella and others?

- Minor Essential Revisions

There are some spelling mistakes in methods (last paragraph) and results.

Discretionary Revisions: None.

Level of interest: An article of importance in its field

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.