Author's response to reviews

Title: S-adenosylmethionine (SAM-e) for the treatment of depression in people living with HIV/AIDS

Authors:

R. Andrew Shippy (ashippy@acria.org)
Douglas Mendez (dmendez@acria.org)
Kristina Jones (kjonesmail@yahoo.com)
Irene Cergnul (liligergnul@aol.com)
Stephen E Karpiak (skarpiak@acria.org)

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Author's response to reviews: see over
Response to Dr. Papakostas' Comments for: MS: 1886808991381125 - The Use of S-Adenosylmethionine (SAM-e) for the Treatment of Depression in People Living with HIV/AIDS

Revision 1: Reference 21 is for Axis II disorders. Remove and replace with the SCID reference for axis-I disorders.
Response: Corrected reference (now Ref #24).

Revision 2: Results section, treatment response sub-section, 2nd paragraph, last sentence: "mean scores at week 8 on the BDI and the HAM-D were...depression" > Remove this sentence as it is misleading. The range provided suggests at least one completer was not a remitter.
Response: Sentence was omitted.

Revision 3: Discussion section, 3rd paragraph, second sentence: "At week 8...below 10 and 7 respectively). Remove this sentence (misleading...see above)
Response: Sentence was omitted.

Response to Editorial Comments:

The following Formatting changes were made per request:
Title - Please remove all unnecessary capitalisation.
Author list - The list of authors in the manuscript should be written exactly as they are in the submission system. Please remove titles from the list of authors.
Keywords - Please remember to then delete the 'keywords' section from the manuscript file.
Abstract - Abstracts must be structured into Background, Methods, Results, Conclusions.
Change "Conclusion" to "Conclusions"
References - The reference list should contain all authors' names. All “et al.” refs. corrected.
Table/figure titles - Please remove all unnecessary capitalisation.
Figures - It is important for the final layout of the manuscript that the figures are cropped as closely as possible to minimise white space around the image.

The following statements have been referenced:
Page 3:
- "Many patients with HIV who are managing their disease are on complex regimens of medications (HAART) and diet to treat their illness"
- "Adding another pill with significant side effects is often viewed by both patient and primary treating physician as an unacceptable burden, either in terms of number of pills per day, or in terms of anticipated side-effect profiles, or risk/benefit analysis."
- "Primary care physicians are often unprepared to recognize depression, which can present as fatigue, weakness, insomnia or loss of appetite, and may seek medical explanations for depressive symptoms."
Page 4:
- "SAM-e donates an active methyl group to several acceptor molecules, including catecholamines, fatty acids, phospholipids, proteins and nucleic acids."
Page 5:
- Where was the SAM-e, vitamin B12 and folic acid from? Noted in text & Acknowledgements
- "We defined clinical treatment response as an improvement in depressive symptomatology of greater than 50% reduction on patient scores on the BDI and HAM-D as our treatment endpoint". Please give references for BDI and HAM-D here.