Author's response to reviews

Title: Factors influencing specialist care referral of multidrug- and extensively drug-resistant tuberculosis patients in Gauteng/South Africa: a descriptive questionnaire-based study

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Replies to reviewer’s comments, 2nd round: Nkosi et al.: “Factors influencing specialist care referral….”

Numbers below refer to the numbering used by HS Schaaf in his comments provided to us in pdf format only.

1. Corrected.
2. We agree with HSS that it is hard to believe that what M/XDR-TB means is still not know, particularly to potential readers of our paper which will be read by colleagues with an interest in the topic of M/XDR-TB. For conciseness of the text, and as those terms are textbook knowledge, we suggest to refrain from entering those definitions and haven’t done so for the time being.
3. Done.
4. Done.
5. Error not identified in ms.
6. Corrected.
7. Adapted.
8. We checked the text but are not sure which statement at the end of the discussion the reviewer is referring too. In any case; firstly, it goes without saying that a one-month lapse period is probably realistic in most SA settings, this is in accordance with own experience; however, the aim should always be to undercut this, and in a certain proportion this is probably the case. To that end, and in view of that the methodology cannot be adapted retrospectively anyway, even if we were in full agreement, this issue remains irresolvable (should there be any remaining); in any case do we think that possibly differing views on this should be acceptable in both directions.
9. OK.
10. OK.
11. The reviewer interprets the used wordings correctly. We have added a legend to what is now table 1 along those lines.
12. Done.
13. Adapted.
14. Adapted.
15. This is a matter of interpretation whether in the broadest sense of the word both DOT supporters/community health workers would fall under the definition of caregivers. However, we have adapted this.
16. We have not elaborated on this because we simply do not know for sure as we did not assess this during the study – the reviewer is correct that this is an interesting point. We have added a sentence to that end to the discussion. However, as procedures should be the same across various facilities, it would remain unclear to what extent this phenomenon would contribute in practice to the extent of the referral problem.
17. We agree this may be confusing; we have removed this sentence.
18. Adapted.
19. We are afraid that our data do not allow to answer this question precisely.
20. The question appears to be unnecessarily provocative – we do not think anybody would seriously expect the number to be memorized. This is of course about knowing about where to find it.
21. We have listed the most important results and suggest to leave it as it stands for conciseness.