Author’s response to reviews

Title: Extracellular micronutrient levels and pro-/antioxidant status in trauma patients with wound healing disorders: results of a cross-sectional study

Authors:

Sandra C Blass (s.blass@uni-bonn.de)
Hans Goost (hans.goost@ukb.uni-bonn.de)
Christof Burger (christof.burger@ukb.uni-bonn.de)
René H Tolba (rtolba@ukaachen.de)
Birgit Stoffel-Wagner (birgit.stoffel-wagner@ukb.uni-bonn.de)
Peter Stehle (p.stehle@uni-bonn.de)
Sabine Ellinger (ellinger@uni-bonn.de)

Version: 4 Date: 24 October 2013

Author’s response to reviews: see over
Reply to the reviewers’ comments (MS 1747554771102525)

Referee 1

This is a carefully done study and the results are well presented. I especially liked the discussion part where authors considered different aspects of the data. However, that this paper will benefit from additional discussion of MDA as a biomarker of oxidative status. This is not the best marker and often is confounded by processes other oxidative stress.”

We now considered the low specificity of MDA in our discussion (p. 13, l. 24 - p. 14, l. 2).

A minor comment: there is probably a typo in the results when the authors say that the levels of peroxides are below the reference level: ”TEAC (P < 0.001) as well as the concentration of peroxides (P < 0.006) were lower than values known for healthy adults.” The table shows that the levels of peroxides was greater than the reference level. So either the statement or the table should be corrected.

We are sorry for this mistake in the results section. We corrected it (p. 11, ll. 9 - 10).

Referee 2

“This is a cross-sectional study by Sandra C Blass et al. In the opinion of this reviewer, this is an interesting study, reporting some novel results. Overall, this study is well designed.”

Minor comments:

1. The control group should be described in the Results.

The values for TEAC, peroxides, and malondialdehyde were obtained from a different number of members of our staff (p. 9, ll. 1 - 3; p. 24, p. 24, ll. 8 - 9). Hence, these subjects cannot be considered as a single group which might be characterized by demographic data.

2. In table 4, "normal range" should be replaced by "control group"

We agree that “normal range” is not the adequate term. However, the number of samples obtained from our staff was different for the investigation of TEAC, peroxides and malondialdehyde (see answer to question 1). Hence, these subjects cannot be considered as a single group. For this reason, the suggested term “control group” is not really appropriate. We now replaced the term “normal range” by “healthy controls” in the heading line (p. 24, l. 2).

In our former manuscript, we used the term “normal values”, which was neither appropriate. We reworded this by using the term “healthy controls” (p. 9, l. 3).

3. Limitation of using height reported by patients should be discussed.

The reason for using the reported height is now presented on p. 7, l. 17. However, the mistake by using the reported height instead of the measured height is neglectable with regard to the BMI. Hence, in our mind, this is not a real limitation which has to be discussed.
To preserve the quality of the discussion, it is better to focus on the true limitations of the study.

4. Results on SGA should be presented in a table or graphic, as they report a high prevalence of malnutrition which should be highlighted

We thank the reviewer for this hint. The results on SGA are now presented in Table 3 (p. 22). A reference to Table 3 was inserted in the text (p. 10, l. 15; p. 11, l. 23).

By inserting this new table, the former Table 3 changed into Table 4 (p. 23) and the former Table 4 is now Table 5 (p. 24). These table numbers were also changed in the text (p. 10, l. 20; p. 11, l. 8; p. 12, l. 4; p. 12, l. 17; p. 13, l. 22; p. 13, l. 13).