Author's response to reviews

Title: Anthropometric, biochemical and clinical assessment of malnutrition in Malaysian patients with advanced cirrhosis

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Author's response to reviews: see over
The Editor
Nutrition Journal

Dear Sir/ Madam

Re: Anthropometric, biochemicla and clinical assessment of malnutrition in Malaysian patients with advanced cirrhosis

On behalf of the authors, I would like to thank the reviewers for their helpful criticisms that have enabled us to improve the quality of our manuscript. Our response to the reviewers, in point-by-point format is as follows:

Reviewer No. 1

Major comments

1) The interpretation of laboratory parameters is still unclear in the revised version.................
The correlation between albumin and CRP is probably not needed.

Response:
i) The following lines have been added to paragraph 5 in the “Discussion” section:

In this study, we demonstrated that serum visceral protein levels did not differ significantly between SGA Grade B and C, but varied markedly between Child-Pugh B and C liver disease. This indicated that visceral proteins were not influenced by nutritional status but more by the severity of liver failure.

ii) The following statement has been added to the “Conclusion” paragraph:

Serum visceral proteins were not found to be an appropriate tool for nutritional assessment in adults with decompensated cirrhosis.

iii) All statements relating to the correlation between visceral proteins and CRP has been removed as per the reviewer’s suggestions.

Minor comments

1) Pag 6. Why were patients with hepatic encephalopathy excluded? Do the authors mean all degree of hepatic encephalopathy or those with severe or persistent hepatic encephalopathy?

Response:
This statement has been clarified. Only patients with Grade 3 or Grade 4 Hepatic Encephalopathy were excluded as we would not have been able to obtain appropriate information from such patients.

2) Pag 6. 2nd paragraph line 2 “of” is repeated two times

Response:
This has been corrected

3) Pag 7. Line 10 “an established measure of muscle protein mass” should be moved to line 15 after (MAMC)

Response:
This has been done

4) Pag 9. Last paragraph: I suggest to change as follows: “For the comparison of nutritional status in cirrhotic patients of various etiologies SGA was also utilized as this has been shown to reliably identify malnutrition-related muscle dysfunction (20). Statistical…”

Response:
Thank you for this helpful suggestion, which we have followed.

5) Pag 10. Last sentence: the difference in anthropometric parameters according to SGA is expected as the evaluation of fat and muscle tissues is included in SGA score. Introduce the sentence with “As expected, in both male and female patients…..”

Response:
This additional statement has been added accordingly.

6) Pag 12. Line 8 “would have” should be “could have”

Response:
This correction has been made accordingly

7) Pag 12. Line 17 “had” should be “was”

Response:
This correction has been made accordingly
8) Pag 12. Line 19 should be “The low levels of biochemical parameters … was mainly indicative of hepatic dysfunction, in fact no difference was evidenced in cirrhotic patients with different nutritional impairment (SGA B and SGA C)”

Response:
In the light of the reviewers comments under “major revision”, we have decided to remove this sentence altogether in this paragraph. Instead, changes have been made to Pg 14, 1st paragraph – see point 9 below.

9) Pag 14. Line 6. Why the authors suggest once again that albumin and transferrin are more sensitive at predicting malnutrition when the lower values in Child C vs B suggests the opposite?

Response:
In the light of the point made by the reviewer earlier, this statement has now been removed. As mentioned above, we have changed the sentence in this paragraph accordingly.

Discretionary Revisions
10) Pag 14. Line 15 “leading to more severe nutritional….”

Response:
This correction has been made accordingly

11) Pag 14. Line 16 Suggestion: “alluded to” change to “reported”; “appear to concur” change to “are in agreement”

Response:
These changes have been made accordingly
Reviewer No. 2

Major revision

1) Definition of malnutrition is based only on MAMC – is this the most reliable way?
   or is your decision to choose this as the parameter of choice due to its use in all patients? How about the SGA or the other tests? There is a need to qualify malnutrition based on these criteria also since the definition stated gives the inaccurate message that malnutrition is best determined primarily through MAMC when in fact your other parameters were also used, with a lot of references to the use of SGA. Suggest to explain why you chose MAMC, BUT not to exclude the other parameters in the definition of malnutrition

Response:
The decision to use <5\textsuperscript{th} percentile of MAMC as the definition of malnutrition was solely for the purposes of using a similar definition that had been utilised in the majority of studies in the literature. This would enable a more standardised method of comparison between our population that from other studies.

We accept that the SGA is an acceptable definition as well, but this definition is more recent & may preclude comparisons with older studies in this area.

2) Discussion page 12: what do you mean by “significant” malnutrition?

Response:
The use of the word “significant” was an error. We have now removed this word.

3) Discussion page 14: line 2-3: what do you mean by this phrase “true non-effect of the SGA”?

Response:
The phrase was intended to indicate that the lack of statistical significance was a Type 2 statistical error, i.e. due to a small sample size. This has been changed accordingly in the manuscript.