Reviewer’s report

Title: State of Progress in Treating Cystic Fibrosis Respiratory Disease

Version: 1 Date: 30 June 2012

Reviewer: Clement L Ren

Reviewer’s report:

The authors have done a great job of reviewing the current status of CF therapy. I just have a few comments and suggestions:

1. When discussing the early onset of lung disease (p. 4), would include the reference by Linane, et al (AJRCCM 2008) that PFTs in CF infants are abnormal by 6 m/o.

2. Is “death” of the exocrine pancreas (p. 6) really the best term? How about fibrosis, which is the reason the disease was originally named CF in the first place?

3. The other issue with gene therapy (p. 7) besides clinical benefit is whether gene transfer/expression can be stably maintained.

4. When discussing CFTR modulation, may want to also discuss phenylbutyrate and ubiquinin inhibition.

5. The results of TIGER-2 were recently published in JCF, so could add this citation. The authors also discuss potential reasons why TIGER-2 failed to show an effect, which might be useful to cite.

6. In the discussion of Hydrators, may want to include the results of the recent ISIS trial.

7. In the discussion of ICS, should make it clear that there has never been an RCT that has studied ICS, but that 2 registry studies have shown ICS therapy is associated with better outcomes. On the other hand, should cite the WISE study, which showed that withdrawal of ICS was not associated with worse outcomes. Finally, should mention that the latest version of the CF treatment guidelines continue to recommend against their use, except if the patient has asthma.

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I have received honoraria for consulting or speaking from the following companies which may be construed as competing interests: