Author’s response to reviews

**Title:** Double vs single internal thoracic artery harvesting in diabetic patients: role in perioperative infection rate.

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**Author’s response to reviews:** see over
To the Editor

The Journal of Cardiothoracic Surgery

[Address]

Dear Sir,

We submit a revised version of our paper “Double vs single internal thoracic artery harvesting in diabetic patients: role in perioperative infection rate” for publication on The Journal of Cardiothoracic Surgery.

We tried to answer to all criticisms and we hope that the present version of the manuscript will satisfy all Reviewer’s and Editor’s issues. The file with the comment of reviewer 2099244283185384 (Dr. Cristiano Spadaccio) was empty. Please, let us know if further revisions are required.

We look forward to hear from You soon,

Best Regards,

Fabio Barili, MD

[Address]
Reply to Reviewer Giuseppe Fiore’s comments (1245135619187670):

We greatly appreciate Your comment on our paper.

Reply to Reviewer Jacob Zeitani’s comments (1302885635188033):

Insulin-dependent diabetes.

Our study was designed to prospectively evaluate the role of BITA grafts on perioperative sternal infections in patients with uncontrolled diabetes mellitus, without differentiating between insulin-dependent and independent, as the main risk factor is the poor glycaemic control, as reported in literature.

Non-skeletonized vs skeletonized thoracic arteries.

This study was not designed to evaluate the role of the BITA harvesting techniques in the onset of postoperative SSI. All patients had the internal thoracic arteries harvested with the same technique and the comparison with papers that evaluated the different harvesting techniques is inappropriate. We simply commented in the discussion section the good outcomes (in terms of mortality and morbidity) of our prospective cohort. Moreover, as we stated in the “limitations” section, the main limit of this prospective study is the limited number of patients enrolled and further randomized trial are needed.