Reviewer's report

Title: Surgical site infections following transcatheter apical aortic valve implantation: incidence and management.

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Reviewer: nicolas noiseux

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Baillot and colleagues are reporting their experience with surgical site infection (SSI) in patients undergoing transcatheter aortic valve implantation (TAVI). The authors should be congratulated for reporting this rare but serious complication following TAVI, and this group is well known for their expertise in the field. Only few manuscripts in the literature discuss this SSI topic, but there is paucity of data regarding the optimal management. Although they report only 5 cases, in a cohort of 154, the follow up was achieved in all patients prospectively and allowed detection of infection. The manuscript is well-written, surgical management well described, and all 5 cases were presented with extensive details.

I have some minor comments, especially for the index surgical procedure:
1-Was antibiotics used peri-operatively during the initial TAVI procedure? If so, which? How many doses/time?
2-Did the surgeons use chest tubes? Where (in the pericardium and/or chest cavity)? How long they were left in place. It is possible that pleural effusion left in place may predispose to infection, please discuss.
3-Echocardiography can detect pericardial effusion/abscess. Is Echo used routinely after TAVI procedure during follow-up? Would it be useful?
4-What can be done to prevent SSI in this surgical setting?

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Declaration of competing interests:

Nothing to disclose