Reviewer's report

Title: Disseminated cutaneous Herpes Simplex Virus-1 in a patient with rheumatoid arthritis receiving Infliximab: A case report.

Version: 3 Date: 7 January 2008

Reviewer: PRABHA RANGANATHAN

I am familiar with the literature and believe that this case meets one of the 7 criteria for evaluation in the journal: Unreported or unusual side effects or adverse interactions involving medications

Has the case been reported coherently?: Yes

Is the case report authentic?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: Yes

Does the case report have explanatory value?: Yes

Does the case report have diagnostic value?: Yes

Will the case report make a difference to clinical practice?: Yes

Comments to authors:

on page 6 the description of BSRBR needs to be modified - ....cohort assembled for the study of adverse events ......

on page 6, in the same paragraph the authors need to expand on and present a more coherent discussion of the possible mechanisms of TNF and steroids on increased susceptibility to HSV. The three statements provided are disjointed, not coherent and insufficient.

one of these statements discusses the rate of HSV in renal transplant patients but it is unclear whether this is localized or disseminated HSV - This needs to be clarified.

on page 6, para 3 states that no deaths or irreversible side effects have been reported with acyclovir - serious side effects such as seizures can occur with acyclovir - this para needs to be changed and more complete info on toxicity provided.

In the same para, any data on duration of acyclovir therapy for secondary prevention of HSV should be discussed. The authors' decision to continue the patient on 200mg alternate day of acyclovir appears arbitrary and any literature
to support this if available should be cited.

Although the report discusses both HSV and pustular psoriasis as side effects of anti-TNF therapy, the discussion is skewed with more emphasis and detail on HSV and only a brief mention towards the end of psoriasis. The discussion on psoriasis needs to be expanded with emphasis on possible mechanisms of this unusual adverse event in patients on anti-TNF therapy.

What next?: Revise and resubmit

Quality of written English: Acceptable