Reviewer's report

Title: Invasive Pulmonary Aspergillosis -10 years post Bone Marrow Transplantation: a case report

Version: 2 Date: 5 June 2008

Reviewer: Mehdi Hamadani

I am familiar with the literature and believe that this case meets one of the 9 criteria for evaluation in the journal: An unexpected event in the course of observing or treating a patient

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?: No

Does the case report have diagnostic value?: Yes

Will the case report make a difference to clinical practice?: No

Is the anonymity of the patient protected?: Yes

Comments to authors:

Rashid et al. report an interesting case of late IPA in an allogeneic HSCT recipient. The report focuses on an uncommon time of presentation of invasive fungal infection in post-allograft setting.

Major comments:

1. Chronic GVHD is a well known risk factor for IPA. The reported patient had obvious BO, which is a manifestation of cGVHD. The authors should clearly discuss the ongoing cGVHD as a predisposing factor in this case.
2. The report patient had numerous infections following allografting, hinting at suboptimal immune reconstitution. What were patients quantitative immunoglobulin levels, CD8 count, CD4 count, and ANC?
3. Erjavec et al. (Clin Infect Dis. 2002 Jan 1;34(1):7-14) reported consensus guidelines for diagnosing IFI in allogeneic transplant patients. Authors should follow these guidelines, and elaborate specifically how many clinical, laboratory, major and minor criteria this patient had for IPA diagnosis. After listing these
criteria authors should mention, if the diagnosis of IPA in this case was “possible” vs. “probable”?

4. T-cell depletion is a risk factor for late fungal infections. Did the patient receive a T-depleted transplant? Please provide exact transplant conditioning regimen. If possible mentioning the CD34 and CD3 dose of allograft will be helpful.

5. An unnecessarily long patient history is provided.

Minor comments:

1. Only generic drug names should be mentioned.
2. Article has several grammatical errors.
3. What was patient’s fungal prophylaxis while on immunosuppression

**Quality of written English:** Needs some language corrections before being published

**Declaration of competing interests:**

'I declare that I have no competing interests'