Reviewer's report

Title: Eosinophilic Pneumonia Associated with Daptomycin: A Rare Case and Literature Review

Version: 1 Date: 6 June 2010

Reviewer: ARGYRIS TZOUVELEKIS

Which of the following best describes what type of case report this is?: 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 the case report ethical?: Yes

Is there any missing information that you think must be added before publication?: 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

Is the anonymity of the patient protected?: Yes

Comments to authors:

This is an interesting, although rare case report, that may potentially have applicability in the everyday clinical practice of a physician working either in a tertiary or a university hospital. Case is well presented and documented and although is extremely difficult to prove a causal-effect relationship in drug-induced pneumonitis, authors provide rigid evidence that prove causality. My only concern is whether authors observed any radiologic improvement from the initial presentation of the patient, since it is being documented that the patient presented with bilateral alveolar edema with a butterfly appearance and bilateral pleural effusions, following administration of daptomycin and amoxicillin. Authors only report resolution of the patient symptoms and signs; however, they document no radiologic resolution. If there was no change in the radiologic features, is it possible that eosinophilia may be attributed to the infectious agent
that provoked endocarditis? i.e a parasite or a fungus? Authors should also report whether the patient was a smoker or a non-smoker ( I guess he was a smoker) and also make a comment regarding his travel history or his exposure history (occupational, domestic, environmental).

Did the authors perform a thoracentesis to the patient? Did they evaluate the pleural effusions whether they were exudates or transudates? Did they observe pleural fluid eosinophilia? In addition, authors report a limited number of cells/µL in the BAL fluid (480), how do they explain this evidence.

Authors should also report whether they obtained an informed consent form from the patient to proceed to publication of his/her case.

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