Author's response to reviews


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Author's response to reviews: see over
Response to Reviewer comments

Reviewer: Chadi Hage

Reviewer: This is a very interesting case report of histoplasmosis in a young and otherwise healthy man, however the diagnosis was not confirmed or supported by any other data (culture, serology, antigen). The only data they have is a pathology that showed intracellular yeast that look like Histoplasma, but they can also be many other pathogens. One would expect that with such extensive pathology sputum culture should be readily positive. The author should make an effort to provide such microbiological data and if not available should acknowledge this limitation in their discussion.

Authors: The limitation has been stated in the discussion.

Reviewer: Pierre Loulergue

Reviewer: The authors report the case of a fatal african histoplasmosis in an immunocompetent teenager. The case is instructive, as it is a rare clinical situation that may be mistaken with other diagnosis. The only remark I have is about the presentation of the case itself. The authors should be more precise on what has been done between day 3 (worsening) and day 7 (death). Did the patient receive antimicrobial therapy (ies) ?

Authors: Thank you for this clarification. More details have been given from day 3 to day 7. The patient was admitted in intensive care unit where he was continued on his anti-TB medications together with oxygen therapy.

Reviewer: G. Marshall Lyon

This is an interesting case of an unusual presentation and disease course of African histoplasmosis. The authors state that this was an immunocompetent patient. However, they also mention there was some mild wasting. Can the authors please clarify this point? Is the wasting secondary to malnutrition, if so are there any other
concerning signs for malnutrition, especially protein malnutrition? Or was the slight wasting somewhat typical for a teenager in Tanzania, especially one from a working class. Malnutrition can be immunocompromising by itself.

**Authors:** Thank you for this important comment. There was no evidence of protein malnutrition. The slight wasting in this case is somewhat typical for a teenager in Tanzania and was probably worsened by chronic disease in this patient. More clarification has been given in the manuscript.

**Reviewer:** The discussion would benefit from some clarification of statements. For example, what is the relapse rate of ketoconazole and itraconazole? Does this vary with length of treatment? I suggest expanding more the compare and contrasting of histoplasmosis in immune competent and immune compromised patients so that readers may draw upon existing experience they may have with immunocompromised patients. In the discussion of diagnostics, please provide more specifics on incubation time for culture, and whether urine/serum antigen testing varies by clinical condition, i.e. disseminated, limited pulmonary, etc.

**Authors:** Amended as suggested by reviewer, highlighted in the manuscript.

**Reviewer:** Quality of written English: Not suitable for publication unless

**Authors:** Extensive editing has been done

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