Author's response to reviews

Title: Aeromonas sobria necrotizing fasciitis and sepsis in an immunocompromised patient: case report and literature review.

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Version: 4 Date: 1 July 2014

Author's response to reviews:

Dear Chief_Editor,

First of all, we would like to thank the reviewers for the appreciation of our revised version.

Please find enclosed the answer to the new comments.

Yours sincerely

Savino Spadaro

Reviewer's report 1

Title: Aeromonas sobria necrotizing fasciitis and sepsis in an immunocompromised patient: case report and literature review.

Version: 3 Date: 10 June 2014

Reviewer: Chen-Chi Tsai

Abstract:

1. Aeromonas sobria must be replaced by A. veronii biovar sobria at the first time.

R: According to your suggestion, Aeromonas sobria was replaced by A. veronii biovar sobria.

2. Use italic type for the name of bacteria.
R: Done

3. lymphocytic ??
R: Done

4. Which kind of fungal infection was found in this patient?
R: Candida albicans. This is now reported in the abstract

Introduction
1. empiema ??
R: Changed accordingly

2. Aeromonas sobria must be replaced by A. veronii biovar sobria at the first time.
R: Done

3. I do not understand the sentence "Septic shock is a major cause of death of these patients, but no mechanism leading to this fatal complication has been shown in Aeromonas infections."
R: We hope that now the sentence is more clear (please see page 4).

Case presentation
1. obnubilation ??
R: obnubilation was corrected with altered state of consciousness

2. What method does your lab use to identify gram-negative bacilli as Aeromonas sobria?? traditional method, Vitak II, Phonex, or 16s rDNA sequencing ??
R: The Vitak II. This is now reported in the case presentation.

3. Can you describe the final condition of the patient's wound? healed or still necrosis ??
R: As now pointed out in the case presentation section, wounds presented no more signs of necrosis

4. Is candidemia was found in the same hospitalization?? Why could the patient not be discharged after improvement of Aeromonas sobria necrotizing fascitis?
The author should describe more clearly in the case presentation.
R: The patients never left the ICU. Hence the candidemia occurred in the same hospitalization. We were not able to discharge the patients because of the need of frequent surgical medications of the amputee residual limbs. These painful medications required deep sedation and hence the need of mechanical ventilation, which prolonged the ICU stay. This is now reported in the case presentation section (please see page 6)
Discussion

1. You can describe and compare the cases in your table.

R: We briefly described cases report reported in literature as indicated by reviewer.

Reviewer 2

Title: Aeromonas sobria necrotizing fasciitis and sepsis in an immunocompromised patient: case report and literature review.

Version: 3 Date: 14 June 2014

Reviewer: Tung-Liang Lin

1. A: Please confirm that all “Aeromoonas sobria” is written in Italics.
R: The name of bacteria was changed in italic form

2. A: Some English spelling should be corrected.
R: We corrected wrong spelling as advised by reviewer

3. A: Please give the reference value when the tests were described at the first time.
R: Done