Author’s response to reviews

Title: The role of Sequence Type (ST) 131 in adult community-onset non-ESBL-producing Escherichia coli bacteraemia

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Author’s response to reviews: see over
Dear Editor:

We are pleased to submit our manuscript entitled: “The role of Sequence Type (ST) 131 in adult community-onset non-ESBL-producing \textit{Escherichia coli} bacteraemia ”, for consideration as BMC Infectious Disease original article.

To compare the epidemiological and clinical features and outcome in clonal group O25b/ST131 and non-clonal group O25b/ST131 in adult patients with non-extended-spectrum B-lactamase (ESBL)-producing \textit{Escherichia coli} \textit{(E. coli)} bacteraemia. We collected 371 consecutive isolates with community-onset non-ESBL producing \textit{E. coli} bloodstream infection in 2010 in a 1200-bed hospital in Taiwan. Twenty adult patients with clonal group O25b/ST131 and 40 patients with non-clonal group O25b/ST131 were compared. And we found clonal group O25b/ST131 accounted for 5.9% of total isolates. The underlying disease and healthcare-associated risk factors were similar in the case and control groups. Patients with the clonal group O25b/ST131 were less likely to have intra-abdominal infection (0% vs. 22.5%; P<0.05) than patients from the control group. The Day 30 mortality rate was similar in the case and control groups (15% vs. 12.5%), but the clonal group O25b/ST131 was more likely to have ESBL \textit{E. coli} infection in the following two years than the control group (20% vs. 2.5% P<0.05). We conclude that Clonal group O25b/ST131 was found in both multidrug-resistant and susceptible \textit{E. coli} strains, causing community-onset bloodstream infection. Although O25b/ST131 does not lead to a higher mortality than other isolates, choosing an appropriate antimicrobials in the empirical therapy of community-onset \textit{E. coli} bacteraemia has become more challenging. The IRB waived informed consent requirements due to the research involves no more than minimal risk to the subjects and the waiver will not affect adversely the rights and welfare of the patients. (EDAH IRB No./ Protocol No: EMRP-102-048).

This manuscript from same data set has not being submitted somewhere else. This manuscript has not been previously published and is not under consideration in the same or substantially similar form in any other peer-reviewed media. All authors had substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data and final approval of the version to be published. All authors contributed to writing of the manuscript. All authors listed have contributed sufficiently to the project to be included as authors, and all those who are qualified to be authors are listed in the author byline.

We greatly appreciate your kind arrangement for peer review and look forward to hearing from you soon.
Sincerely yours,
Jiun-Ling Wang