**Author’s response to reviews**

**Title:** Virological failure reduced with HIV-serostatus disclosure, extra baseline weight and rising CD4 cells among HIV-positive adults in Northwestern Uganda

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**Version:** 2  **Date:** 09 Jun 2016

**Author’s response to reviews:**

Reviewer #1: In this manuscript, Izudi et al. investigate the incidence and predictors of virological failure among HIV-positive adults in Northwestern Uganda. Indeed, the authors provide some important information about HIV virological failure study.

In the revised version, the authors made some changes of the manuscript and add more data, especially for the samples number. I strongly suggest the authors to mark the each change, otherwise it is difficult to compare with original version. To my opinion, the revised version is good to be published at BMC Infectious Diseases.

Response: Thank you for this encouragement. We have made more revisions as per comments from Reviewer #2 and Reviewer #3. The changes in the manuscript are now text highlighted in blue color.

Reviewer #2: The manuscript, entitled "Virological failure reduced with HIV-serostatus disclosure, extra baseline weight and rising CD4 cells among HIV-positive adults in Northwestern Uganda.", analyzed data from patients treated with standard anti-retroviral treatment, in order to assess virological failure at first line therapy. The main finding of the analysis is related to disclosure of HIV-serostatus that is associated with better outcome of antiretroviral therapy. The result, if not particularly original, is interesting, however data reported are not clear and need re-assessment.

Comments
Table 1. The table reports the general characteristics of patients include. The total reports is 248 (should be 383). The sum of values reported in the column in some cases is not 383, suggesting that some cases have missing values, if so, they should be indicated in the table.

Response: Thank you. This was a typing error. It is now corrected. The sum of values for all the variables is consistently 383.

Results. This section is long and somewhat difficult to read. I suggest to reduce I in size, removing values (numbers, percentages HR) that are already reported in tables and shortening the text. The result section should be also divided in concise sub-sections with title (i.e. general characteristics, incidence of failure …).

Response: Thank you for this brilliant suggestion. We have removed the numbers and percentages of incidence rates already reported in Table 2. The text is somewhat shortened currently. We have divided the result section into concise sub-sections.

Table 2 and Hazard Ratios. Only significant variables are reported. My suggestion is to report in one table all variables analyzed with total and incidence ratios, including those in table 1 (religion, occupation, tribe…) and table 2 (WHO stage, CD4 count …). Moreover, table 2 should report the HR for all the variables (religion, occupation and other factors included) and aHR for significant variable included in multivariable analysis. The way of managing missing data, if present, should be also indicated in the text

Response: Thank you very much.

We have thoroughly revised Table 2. We have included all variables (significant and insignificant) in Table 2. Moreover, we have included data on the variables of age, residence, and marital status, type of employment, education, religion and tribe. The corresponding unadjusted Hazard Ratios were as well stated.

There was no missing data in this study. The initial discrepancies in totals within the Table 1 was a typing error. It has been addressed. All these changes are text highlighted in blue color.

Reviewer #3: About the article entitled "Virological failure reduced with HIV-serostatus disclosure, extra baseline weight and rising CD4 cells among HIV-positive adults in Northwestern Uganda", I suggest reviewing the way the article was written. The methodology should be written in clear and logical. I suggest not putting information related to the results of the method session. For example, the number of participants. This information would be better in the results session. I thought the way the results were described extremely confusing, and it
should be reviewed. The number of participants is low, I suggest that it is a descriptive study of these participants and not try to assess incidence.

Response: Thank you for this wonderful comment.

We have reviewed the way the article was written. The methods section was revised to ensure clarity and logical flow. We have removed information pertaining to results section from the methods section. The result section was also reviewed as per Reviewer #2’s comment. The number of participants may be low but, this was a secondary data. It is not possible to increase the sample size because we reviewed secondary data for participants over time (cohort data). I think it is not a descriptive study but rather a retrospective cohort study because participants were followed forward in time using a secondary data. All changes in the article are text highlighted in blue color.