Author’s response to reviews

Title: High prevalence of multidrug-resistant gram-negative organisms in HIV positive men

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To:

Prof. Castelnuovo

- Section Editor -

BMC Infectious Diseases
Manuscript resubmission of the revised manuscript:

“High prevalence of multidrug-resistant gram-negative organisms in HIV positive men” (INFD-D-16-01002)

January 3rd, 2017

Dear Prof. Castelnuovo,

Please find enclosed our re-revised manuscript entitled “High prevalence of multidrug-resistant gram-negative organisms in HIV positive men” by Claudia Reinheimer and colleagues to be considered for publication in BMC Infectious Diseases (INFD-D-16-01002).

We thank the editors and the referee for their comments providing helpful criticisms that we tried to address in our manuscript (for details, please see our detailed point-by-point-response; changes in the text are marked in red). Introduction of the suggested modifications resulted in a slight change in total word count (now: 2,469 words) and a new reference (#27).

In accordance to the referee’s comments we furthermore broadly restructured the discussion. For example, we more clearly discussed the implications of the findings in context of existing research (please see lines 180-212) and inserted a short paragraph on limitations of the study (please see lines 214-233).

We hope that our manuscript is now suitable for publication in BMC Infectious Diseases.

Yours sincerely,

Claudia Reinheimer
Reviewer 1

1. I still think you should calculate the exact p-values (lines 46-48). You can't talk of "significantly higher" without indicating the p-values.

P values were calculated and inserted. Corrected as suggested.

2. In this section, briefly explain why co-morbidities and previous antibiotic use were not considered in sampling.

Explanations are now given in lines 114-116. Corrected as suggested.

3. By sample size calculation, I mean you should explain how "109" was obtained as an acceptable sample size.

Considering that sample size required to yield a power of 0.95 and Cohen’s d = 0.5 (effect size: medium) is n=105, we matched (also surpassed) the required sample size. We inserted a respective paragraph in “Statistical analysis”. This information is now given in line 148. Done as suggested.

4a. Include a legend below each table and define all abbreviations e.g Table 1. What is A1-C3?

A1-C3 represents the internationally well established AIDS classification according to the CDC-classification (see citation #19). This information is now given and cited. The other information required now are also given. Corrected as suggested.

4b. Table 2: Abbreviations should be below not the top. Each table should be self explicit without reading the text.

Corrected as suggested.

5. Cross check that your tables are in line with the guidelines of the journal.

We carefully checked the guidelines and removed bold text as well as italics. Corrected as suggested.
6. Move your hypothesis to the "introduction section".  

Thank you for this helpful advice. Done as suggested.

7. Your lengthy limitations seem to overshadow the findings of your study. Need to clarify and emphasize the importance of your findings. E.g the findings of your work are only on lines 177-184 while the rest are limitations. I strongly suggest you rearrange (re-write) your discussion.

and

8. Discuss each key finding as a separate paragraph and elaborate it's importance and implication on HIV management.

and

9. Include a short paragraph on the limitations of the study and make suggestions for future work.

Please find our discussion broadly restructured (in accordance with comments #7 and #8). In accordance with comment #9, please see a short paragraph on limitations (lines 214-233). Done as suggested.

10. Conclude on a positive note.

Thank you for this comment. We understand the idea of the referee and discussed this extensively. However, we feel that the conclusion should be kept free of any subjective influences (due to the strict scientific nature of this publication). Most probably, our neutral conclusion is the best way to approach to this exceptionally sensible issue.

11. Language

Language improvement was done by a native speaker. Done as suggested.