Reviewer’s report

Title: Safety and Efficacy of Prophylaxis for Pneumocystis jirovecii Pneumonia involving Trimethoprim-Sulfamethoxazole Dose Reduction in Kidney Transplantation

Version: 1 Date: 07 Feb 2019

Reviewer: Marta Kicia

Reviewer's report:

Comments to the Author:

This paper presents an interesting retrospective review that points out the efficacy of TMP-SMX treatment in PcP prophylaxis and the risk of PcP development after TMP-SMX dose reduction. Moreover, this analysis highlights the problem of the necessity of TMP-SMX dose reduction due to adverse effects.

General comments:

The use of the PJP abbreviation in description of Pneumocystis pneumonia is quite unusual. I would suggest to use PcP instead.

Analysis in this manuscript considers the incidence of PcP after TMP-SMX dose reduction. However, since Pneumocystis colonization is a challenging problem in transplant recipients even despite the use of TMP-SMX prophylaxis, information concerning asymptomatic infection would be valuable.
Detailed comments:

Methods:

Information concerning p value considered as significant is missing.

Results:

The division of patients according to the time of receiving reduced TMP-SMX dose is unclear (page 8, lines 25-35). First of all, since group of 233 patients maintained a full dose of TMP-SMX for 12 months, such division should be described for the rest (205) of patients only, not for all 438 patients. Moreover, the information concerning pattern of treatment (reduced dose time-period, the number of dose reduction episodes…) would be valuable.

For some of continuous variables information concerning SD is missing, so please supplement it.

Figure 1:

There are three patterns of TMP-SMX dose reduction mentioned; however in a graphic presentation only "full dose" and "reduced dose" are included and it is not clear what the proportions of treatment "2" to "3" are. In my opinion "reduced dose" should be divided into "2" and "3" in the graph.
Table 1:

The lines concerning patients' age, sex, donor source, number of transplant etc. are illegible. I would suggest to separate variables (males/females, deceased/alive, etc.) in separate lines. Moreover, for some parameters data description is missing (N, %, SD). Also the abbreviations used in the table should be explained.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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