Author’s response to reviews

Title: Use of glatiramer acetate between 2010-2015: effectiveness, safety and reasons to start GA as first or second line treatment in Swiss multiple sclerosis patients

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Author’s response to reviews:

Dear Editor,

We would like to thank you and the reviewers for your positive feedback on our manuscript “Use of glatiramer acetate between 2010-2015: effectiveness, safety and reasons to start GA as first or second line treatment in Swiss multiple sclerosis patients.”

Please, find below our point-by-point reply to your final comments.

We are looking forward to receiving your final decision soon.

Kind regards

Yours, sincerely

PD Dr. Chiara Zecca
Technical Comments:

-- In the section 'Funding', please also describe the role of the funding body/bodies in the design of the study and collection, analysis, and interpretation of data and in writing the manuscript.

The section ‘Funding’ has been completed as suggested and now reads:

“TEVA Pharma provided financial support for data pooling, analysis and writing of the manuscript. TEVA Pharma contributed to the design of the study. TEVA Pharma did not actively participate in the collection, analysis, and interpretation of data and in writing the manuscript.”

-- Thank you for providing a response to the reviewers/Cover Letter. As these documents are no longer required at this stage of the publication process, please remove them from your submission’s supplementary files.

We have removed these documents from our submission’s supplementary files.

-- Thank you for providing you strobe checklist. As this document is no longer required at this stage of the publication process, please remove it from your submission’s supplementary files.

We have removed this document from our submission’s supplementary files.

-- Please include the full name of the ethics committees (and the canton to which it belongs to) that approved the study and the committee’s reference number if appropriate.

The full name of the ethics committees competent for the various cantons that received the study notification has been included. Given the study type, a field report, the ethics committees did not assign a reference number to this study.

--At this stage, please upload your proofread manuscript as a single, final, clean version that does not contain any tracked changes, comments, highlights, strikethroughs or text in different colours. All relevant tables/figures/additional files should also be clean versions. Figures (and additional files) should remain uploaded as separate files. Please ensure that all figures, tables and additional/supplementary files are cited within the text.
Reviewer reports:

Ingo Kleiter (Reviewer 3): Most issues were adequately addressed and the manuscript significantly improved.

Regarding the uncertainties concerning methodology to capture all relapses and adverse events, the points mentioned in the rebuttal are acknowledged. I recommend to add in the discussion, that other recent real-world studies like the one from Buron et al (actually it was an epidemiological study including ALL Danish patients on DMF and TFL) found similar ARRs, which probably reflects the fact that nowadays these drugs (including GLAT in your study) are given to patients with less severe disease activity and that others with more disease activity a priori are treated with drugs with higher clinical efficacy.

We thank Dr. Kleiter for his positive feedback and we have further changed the discussion section according to his suggestion. The sentence now reads:

“Another recent, epidemiological study (Buron, Neurol, 2019, 92(16):e1811-e1820) including Danish patients treated with teriflunomide and dimethyl fumarate in a real world setting found similarly low rates of relapses, probably reflecting the current use of injectables or oral first line therapies in patients with less severe disease activity.”