Author’s response to reviews

Title: Burden and Genotype Distribution of High Risk Human Papillomavirus Infection and Cervical Cytology Abnormalities at Selected Obstetrics and Gynecology Clinics of Addis Ababa, Ethiopia

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Author’s response to reviews:

16 June 2019

Editorial

BMC Cancer

Response Letter

I am writing this letter in response to the editorial’s comment given on the date 18 May 2019 for our Manuscript which was submitted to your honored journal.

I hereby provided a response for each comment below:
1. Methods. Please describe who or how many cytologists and his/her degree of expertise did the cytological diagnosis.

   Addressed-

   Two Medical Doctors with Diploma in Pathology and Cytology expertise

   Method section, Line number 101-103, page number 4

2. Results. Lines 141-145 and Figure 2.

   The statement that the age range 31-60 was found to have the highest proportion of positivity. Is this association statistically significant or solely reflect the fact that this age group has more patients? Please clarify this.

   Addressed-Line # 146-147, Page number 7

   Figure 2, I do think is not necessary, and from the opinion of this reviewer, it can be deleted.

   Addressed- Based on the reviewer comment, the authors agreed and removed Figure 2

3. Please define in table 2 and 3, "COR" and "AOR". Also, clarify the meaning of refa (a) in superscript)

   Addressed-Line number 167 and 169, Page number 8 and 9.

4. Lines 169-175. Abnormal cervical Cytology and Table 4. Please state whether these differences were statistically significant. Also, indicate this in the table.

   Addressed-Line # 176-179, Page number 10

5. Lines 239-246. Please detail in a table or in the text, how the Kappa value was determined. Is unclear for this reviewer.

   Addressed- Line number 103-104, Page number 4

6. The discussion and conclusions are somehow redundant or repetitive and merely descriptive, authors should try to condense these two sections and do not only limit to compare
their results with other studies, but try to hypothesize the clinical or epidemiological meaning of their findings.

Addressed- Both the discussion and conclusion part re-edited based on the reviewer comment.

7. Figure 1 and 3 should also include in the pie chart the "negative" percentage and percentage of "normal cytology cases" respectively.

Addressed- Negative percentage for HR HPV and Normal cytology for Pap smear included in each pie chart

8. The discussion should also include some comments on the proportion of cytologically normal cases who were HR HPV positive in this study as compared to the literature.

Addressed- Line number 290-294, Page 14

Kindly, looking forward to hearing from you soon.

Sincerely,

Kirubel Eshetu Ali