Author's response to reviews

Title: Trachoma in Yunnan province of Southwestern China: findings from Trachoma Rapid Assessment

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Author's response to reviews:

Dear editors,

Thank you for giving us one more opportunity to revise the manuscript "Trachoma in Yunnan province of Southwestern China: findings from Trachoma Rapid Assessment" (BOPH-D-17-00107). We read carefully the reviewer reports and made thorough revision according to the suggestions. The point-by-point response to the comments is listed below. We hope the revision fulfills the requirement of BMC Ophthalmology and could be accepted. Thanks again!

Sincerely yours,

Min Wu
On behalf of all co-authors
Reviewer reports:

Christopher Estopinal (Reviewer 1): Only comment: page 8 line 17-18 states that the 1987 Yunnan province survey found that 17.17% of participants were blink from trachoma. I do not believe this math is correct (107 participants of 109181 total participants). Otherwise looks great.

Thank you. The calculation was wrong. The percentage should be 0.098%. It has been modified in page 8 lin 18.

Allen Foster (Reviewer 2): The revised paper reads better.

Abstract; Results; discussion and Conclusion

1. 5/160 TS and 1/160 TT and 1/160 CO are not 1.5,0.3 and 0.3% respectively, see table 1, please correct. Because TRA is not a random sample pop based survey, it is not appropriate to age standardised prevalence rates. This also needs correcting in Results.

Thank you. In abstract part on Page 6 line 32-36 and the results part on page 12 line 47-50, the age standardised prevalence rates have been deleted as suggested.

2. The conclusion that blinding trachoma existed several decades ago because of the existence of 1 case of TT and 1 case of CO is not valid - the numbers are insufficient for this conclusion, and cases of TS are not necessarily blinding. I suggest the conclusion is that out of 450 children and 150 daults only 1 case of Tf, i case of TT and i case of CO were found in the highest at risk communities, indicating that trachoma is unlikely to be a significant public health problem. Similar revisions need to be made in the Discussion and final conclusion.

Thank you. We fully agree with this point. In abstract part on page 6 line 40-44, in discussion part on page 15 line 49-50, and in conclusion part on page 17 line 25-32, the conclusion was modified as suggested.