Author’s response to reviews

Title: Distal and Lateral Subungual Onychomycosis of the Finger Nail in a Neonate: a Rare Case

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Author’s response to reviews:

Dear editor and reviewers, thank you. We appreciate the valued time you spent for reviewing this manuscript to enhance its quality. I would also like to respond to the comments in the order they were received.

Editor Comments: Would attempt to address all issues raised by the reviewers; however if some information is not available on the infant at this point, that may not preclude acceptance. Would, however, carefully weigh and assess each reviewer’s comments.

Author’s response: Many thanks for comments and suggestions you made during editorial review. We have addressed all the comments raised my reviewers.
Reviewer 1: Anucha Thatrimontrichai: Comments to the Author

1. Abstract: case presentation and conclusion should be more concise and explicit. Abbreviations are avoidable in the abstract.

Author’s response: Abbreviations are removed and changes are made as suggested by reviewer.

2. Bacterial nomenclature: Organisms should be referred to by their scientific names according to the binomial system. When first mentioned the name should be spelt in full and written in italics. Afterwards the genus should be abbreviated to its initial letter, e.g. 'C. albicans' not 'C albicans'

Author’s response: Changes are made as suggested by reviewer.

3. Case presentation

3.1 Please add more detail of characteristics e.g. gestational age, birthweight, birthweight compared with gestational age

Author’s response: Gestational age was 39 weeks of gestation, birth weight was 3250 grams. It is added in case presentation and highlighted in red text. Page no: 03 , Line: 76-77.

3.2 In the 2nd paragraph: "conscious and playful" should be use term "active"

Author’s response: Changes are made as suggested by reviewer. Page no: 3 , Line: 79.

4. Investigation: Abbreviations (SDA, CLSI, MIC, OSI and MADI-TOF) and List of Abbreviations: not need because less than 3-5 repeated words.

Author’s response: Changes are made as suggested by reviewer. Above mentioned Abbreviations and List of Abbreviations at the end of manuscript were removed.

Reviewer 2: Maria T García-Romero, MD, MPH (Reviewer 2): Hi, this is an interesting case report of DLSO in a neonate.

1. On page 3 line 12 you mention granuloma. What exactly do you mean? What type of granuloma?
Author’s response: It is called Candida granuloma. It is a variant of chronic mucocutaneous candidasis associated with chronic infection mainly by Candida albicans in which the skin lesions are rather granulomatous and hyperkeratotic.

We felt it is not much relevant to present case, so term “granuloma” has removed from the manuscript.

2. On the same paragraph, I would include onychorrhexis as a manifestation of onychomycosis by Candida sp.

Author’s response: Changes are made as suggested by reviewer. Page no: 03, Line:60

3. On page 3 line 53 you mention there is no onycholysis. The pictures suggest there is onycholysis. Also, the type of onycomycosis (DLSO) caused by Candida is usually associated with onycholysis as you yourself mention in page 5 line 17.

Author’s response: It has been corrected.

4. On page 3 line 60 you mention the condition would be self-limiting. What is the rationale for this?

Author’s response: As already mentioned in discussion Page no: 05, Line: 125, linear growth of the nail in the neonate is very rapid and also in this case initially lesion affected the minimal area of the nail, so we thought it wouldn’t progress, after nail trimming.

5. Regarding treatment, did you perform any blood work?

Author’s response: Yes blood investigations like complete blood count, liver function test, renal function test, random blood sugar and urine routine examination were within normal limits. It is incorporated in manuscript. Page no: 04, Line: 115-116.

6. Was the baby born via vaginal delivery? Was the mother tested for vaginal candidasis?

Author’s response: Yes, baby was born via normal vaginal delivery. We couldn’t access to information regarding the screening for vaginal candidasis, as delivery was done in different
remote hospital. Mother was not investigated during the course of present study as she had not given her consent to collect the specimen.

It is addressed in discussion part. Page no: 06 , Line:167-168

7. Page 5 line 5-6 should say Onychomycoses commonly affect ...

Author’s response: Changes are made as suggested by reviewer