Reviewer's report

Title: Clinical impact of high-attenuation and cystic areas on computed tomography in fibrotic idiopathic interstitial pneumonias

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Reviewer: Michael Kreuter

Reviewer's report:

In their manuscript „Clinical impact of high-attenuation and cystic 1 areas on computed tomography in fibrotic idiopathic interstitial pneumonias“ by Tanizawa et al., the authors describe various CT indices and their correlation to functional and prognostic parameters. While the intention of this analysis has to be highly valued there are a couple of points which might have influenced the results of the analyses to a significant proportion.

1. Patients were retrospectively recruited with a HRCT between 2004 and 2006. However, in the methods section the authors state that they were classified according to the proposals in 2011 and 2013. Does this mean that all patients had been reclassified in an experienced multidisciplinary team? If not, the diagnoses have to be questioned.

2. The definition of unclassifiable disease in this cohort is not supported by the literature. Especially should clinical parameters be taken into account. Therefore there could be a significant proportion of patients with IPF, iNSIP etc. in the cohort of unclassifiable ILD. The definition used by the authors might be the reason of this unexpected high number of patients with unclassifiable disease. This could be a significant bias of this analysis.

3. The method used for HRCT might not reflect the standard of multi slice thin section CT being used nowadays. Especially the 10 mm intervals in CT might have influenced the results in this manuscript to a significant amount.

4. Treatment issues might also have influenced the survival analysis (e.g. immunosuppressive treatment in IPF as a parameter with a more detrimental survival effect). At least this point is discussed by the authors.

5. Figures with CT examples of their analyses are missing

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:
I declare that I have no competing interests