Author’s response to reviews

Title: The association between the ratio of monocytes:lymphocytes at age 3 months and risk of tuberculosis (TB) in the first two years of life.

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Thank you for sharing the reviewer’s comments on our response to their critique. We have made the following changes, shown in blue highlights in the submission, to address the helpful suggestions from Reviewer 1:

1. We have revised the concluding paragraph of the discussion (line 328-330):
   The modest effect size suggests that the ML ratio plays a modest role in predicting TB disease risk in infants. Therefore, for clinical utility, the ML ratio may benefit from combination with other tools to identify at-risk infants. The replication of this finding across animal, infant and adult studies nevertheless suggests that the ML ratio is a pathophysiological predictor of tuberculosis disease and further study of this trait may yield insight into why some infants succumb to TB disease.

2. We have amended the abstract to make the statement more accurate. Removing the double negative would imply that we had applied a statistical test for similarity therefore we have corrected the sentence as best as possible whilst retaining accuracy (line 76-77)
   The association was not statistically dissimilar between HIV infected and HEU children.

3. To improve clarity we have corrected lines 77-80 of the abstract:
   ML ratio was associated with composite endpoints of TB disease and death and/or TB infection. It was strongest when restricted to probable and definite TB disease (HR 1.50; 95%CI 1.19-1.89, p=0.006).