Reviewer’s report

Title: The novel use of oral antibiotic monotherapy in prosthetic valve endocarditis caused by Finegoldia magna: a case study

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Reviewer: Mohammed Nasser Aldahmashi

Reviewer's report:

The authors,

Thank you for having the chance to review your manuscript titled "The novel use of oral antibiotic monotherapy in prosthetic valve endocarditis caused by Finegoldia magna: a case study". Which describes the use of a single oral antibiotic agent (metronidazole) in treating a rare case of bioprosthetic valve endocarditis in the aortic position. The authors concluded that their case is the 9th reported case of Finegoldia magna infective endocarditis in the literature, they suggested that it raises the possibility of a more patient-friendly and cost-effective means of providing long-term antibiotic therapy in suitable patients with prosthetic valve endocarditis and they highlighted the possibility to apply POET trial recommendations for post-operative patients after cardiac surgery.

First, I should acknowledge the authors for their well-written manuscript. You presented a rare case of prosthetic valve endocarditis in a good way with some useful ideas for the reader. This manuscript will add good value to clinical cases previously reported in the literature. Although, it contains interesting data it lacks many important points which weakens the presentation:

Relaying on the POET trial (reference no.4) in fact this trial didn't include a single case of anaerobic endocarditis infection caused by Finegoldia.

The authors presented that there were sensitivity results for Clindamycin (0.064) slightly different than of Metronidazole (0.047). In our daily practice we always combine dual oral antibiotic therapy adding Clindamycin with metronidazole in anaerobic infections. Guided by the drug bioavailability and the differences in pharmaceutical preparations which can differ between countries, also the greater discrepancies in patients' susceptibility to acquire a rare anaerobic infection.

Authors didn't mention the full history of the patient whether he was an immune-compromised patient or not. What's the risk factors for him to have such extraordinary manifestations.

Using metronidazole for 62 days is considered very long period on a single drug! The side effects can include the prolonged metallic taste sensation, plus it can affect the normal gut microbiota as it - (Flagyl® tablets) - acts locally more than its systemic effect. It can disturb the absorption of other nutrients and medications.
Authors didn't mention the results of serial blood cultures of this patient (or they relied only on Echocardiography assessments!).

No picture of excised infected valve.
He didn't mentioned the criteria of clinical stability of IE which is the coroner stone to shift to oral regimen

I should encourage the authors to rewrite their work, elaborate more on serious justifications regarding their medications' choice. Thank you. The title is clearly reflecting the reported case.

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An article of importance in its field

**Quality of written English**
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