Reviewer's report

Title: Prevalence and microbiological characteristics of infected foot-ulcers in patients with Rheumatoid Arthritis.

Version: 1  Date: 25 January 2015

Reviewer: Robert Field

Reviewer's report:

This article’s questions investigate the microbiology of infected foot ulcers in a rheumatoid arthritis (RA) population. This is an area of investigation currently lacking in the literature.

The primary aims (Introduction para 4) were clear and followed through within the article.

In relation to the primary aim, sufficient information is included to replicate the work and similarly in terms of the microorganisms identified.

The results section is clearly presented.

Major Compulsory Revisions

1. I am less clear about the secondary aims (introduction para 5), relating to risk factors for infection in patients with RA. As currently described, I am unsure as to how comparing the ‘swab’ and ‘no swab’ ulcer groups informs this question. The data provided for the ‘no swab’ group is limited to demographics and disease duration. This secondary question is not reflected within the conclusion.

2. Reference is made to medication in the conclusion section (para 4). This may be better placed within the discussion section. Reference is made to evidence for stopping DMARD therapy in the presence of infection but this is not itself referenced. This statement may be considered more applicable to biologic therapies rather than DMARDs.

Minor Essential Revisions

3. Table 1 – suggest using ‘y’ and ‘n’ within the columns for diabetes, CVD/PVD and CTD for consistency with the rest of the table. Alternatively use ‘+’ symbol in the boxes currently empty.

Discretionary Revisions

4. The group of patients attending the ulcer clinic are older with long established disease – this is developed in the discussion. The ‘swab’ group display co-morbidities associated with RA but similar data relating to the ‘non swab’ group is not present. This would have greater informed this part of the research aim (see major revision).
5. Within the discussion para 6 (ability of wound swabs ...) may be better placed to immediately follow para 4 (local practice, after clinical diagnosis...) – having discussed the issue of clinician accuracy in the diagnosis of infections, immediately following this with an exploration of issues around swabs balances the argument.

6. The references provided are appropriate. Ulcer management is included within the guideline produced by North West Podiatry Services Clinical Effectiveness Group (2014) –“ Rheumatology Guidelines For The Management Of Foot Health For People With Rheumatoid Arthritis (http://www.prcassoc.org.uk/guidelines ). It may be appropriate to consider referring to that document.

7. The use of semi colons through the paper interrupt the read.

Overall Impression: This paper is based on a small sample with missing / incomplete data – these factors are acknowledged by the authors. This does limit the value to translate to clinical practice. However the article does raise a number of issues to consider relating to clinical practice and wound swabs as part of ulcer management.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests'