Reviewer’s report

Title: Uro-Vaxom® versus placebo for the prevention of recurrent symptomatic urinary tract infections in participants with chronic neurogenic bladder dysfunction: a randomised control feasibility study

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Reviewer: Kurt Naber

Reviewer’s report:

This is a very interesting study protocol on prevention of recurrent UTI in patients with chronic neurogenic bladder dysfunction with Uro-Vaxom vs placebo.

The study protocol is well structured and well presented. It is a feasibility study and therefore will only include a relatively small number of patients (n=48).

I only have a few questions and comments:

1) I agree that in NBD-patients the definition of symptomatic UTI is not well defined. It is therefore justified that the authors use as surrogate parameter the „need" for antibiotic therapy indicated either by the treating physician or the patient who is used to manage their UTI episodes. There is no other pragmatic way, which is justified because the study is blinded and placebo-controlled.

2) It is appreciated that during the study the different symptoms observed by the patients for each UTI episode will be carefully registered and analysed.

3) Since this is not a study on antibiotic therapy of acute UTI episodes, I agree that urine cultures are not an essential part of the study, although I assume that they will be registered when performed.

4) At 3 and 6 months urine culture is, however, part of the protocol. Therefore at this time points not only the amount of bacteriuria, but also the cultured bacteria including routine susceptibility testing should be recorded.

5) Of course, I agree that asymptomatic bacteriuria at 3 and 6 months should be registered, but I do not agree that their presence or absence can be taken as an efficacy parameter. The studies of the University of Lund have even shown, that presence of ABU could be correlated with positive outcome (reduction of recurrences).

6) The authors have cited one study with Urovaxom in NBD patients (Hachen et al 1990). In the meantime another study, although retrospective, was published and could be cited: Jörg Krebs, Stefanie Fleischli, Jivko Stoyanov,, Jürgen Pannek. Effects of oral immunomodulation therapy on

7) I also have problems that patients taking (long-term) antibiotic prophylaxis (not antibiotic treatment) can be included into the study. It would be ok, if only the feasibility of such a study is the main aim. But of course I assume that these patients will be clearly indicated in the outcome analysis.

Overall this will be a very important and needed study, whether immunomodulation with oral Uro-Vaxom could be an effective prevention of rec UTi in these patients.

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I am consultant of Vifor, the company producing Uro-Vaxom

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