

Format for ANSWERING REVIEWERS

August 9, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 4049-review.doc).



Title: Tuberculosis and hematopoietic stem cell transplant: Review of a difficult and often underestimated problem.

Author: Guadalupe García-Elorriaga, Guillermo del Rey-Pineda

Name of Journal: *World Journal of Clinical Infectious Diseases*

ESPS Manuscript NO: 4049

The manuscript has been improved according to the suggestions of reviewers (in yellow in the text):

Reviewer # 1.

1. Please modify the title to, "Tuberculosis in hematopoietic stem cell transplant recipients: Review of a difficult and often underestimated problem."

Response. The title has been modified.

2. By "receptors" do the authors mean "recipients"? If so, please change throughout the paper.

Response. It has been changed. Introduction, page 4.

3. Introduction section, first paragraph: Please reference the statements below separately with original studies:

- a. allogeneic SCT (alloSCT) can be conducted on an out-patient basis;
- b. allotransplants can be performed in elderly or frail individuals; and,
- c. allogeneic SCT (alloSCT) can be done without red blood cell or platelet transfusions

Response. It has been made according to the suggestions of the reviewer. Introduction, page 4.

4. Introduction section: The portion on history of transplant appears redundant since the review is not about Mexican patients alone. Please delete the section beginning from "In our country, the history of SCT can be divided..." till the Epidemiology section.

Response. It has been made according to the suggestions of the reviewer.

5. Please add a table listing the major original papers that looked at TB in HSCT recipients in the format below:

Lead author, Year	Countr(ies) of study	Number of cases	Incidence of tuberculosis among HSCT recipients / incidence in general population	Other salient findings (e.g. pulmonary to extra-pulmonary ratio, outcomes)

Response. It has been made according to the suggestions of the reviewer. First paragraph, page 7.

6. Please add a table listing “Salient aspects for diagnosing tuberculosis in a HSCT recipient” giving the sensitivities and specificities of various tests for tuberculosis in this setting as well as whether they will indicate active or latent TB or both:

- Mantoux test
- Smear microscopy for acid and alcohol fast bacilli (AAFB)
- Nucleic acid amplification test (NAAT)
- Culture
- Serological or antibody based blood tests
- Interferon gamma release assays
- Chest Radiography

Response. It has been made according to the suggestions of the reviewer. Last paragraph, page 8.

7. Please add a flow chart / figure outlining the pathogenesis of TB in HSCT recipients.

Response. The figure has been added. Last paragraph, page 8.

8. It would be nice if the authors could add somewhere their own centre’s experiences with the problem, even if already published / presented along with the peculiar challenges they faced.

Response. Unfortunately, in our center is not given monitoring of TB to this type of patients.

9. The language at places is rambling and can be tautened. For instance, the second sentence of the Conclusions section can be broken up into 2-3 smaller sentences.

Response. It has been made according to the suggestions of the reviewer. Conclusions, page 15.

Reviewer # 2.

<i>Abstract and introduction</i>	Anywhere in manuscript; the authors described the aim of this work. Thus, authors should clearly describe the aim of review, without the objective is difficult to understand the authors' proposal.
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Response. It has been made according to the suggestions of the reviewer. Abstract, page 2 and Introduction, page 4.

Introduction:	The authors focus on the introduction of transplantation and then suddenly they start describing the epidemiology of the frequency of tuberculosis in the world and in the next section describing return on transplantation. These topics are confusing, redundant and are not correlated. There is need to rewrite them completely, including others topics of manuscript. Furthermore, in the introduction, the authors must modify the sentence: "In our country, the history of SCT can be divided in two stages."
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Response. In Introduction, we addressed general aspects of the review, then in each section addresses the specific issues. The rest has been made according to the suggestions of the reviewer.

Suggestion	I suggest that the authors reformulate their ideas, revising all the topics of the manuscript and direct these topics as the purpose of the review.
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Response. Your watching was very successful, indicating the purpose in Abstract and Introduction everything becomes clearer.

Suggestion	I suggest that the authors reported clinical cases from the literature and the group itself that is linked to the theme of the review, this will improve the work;
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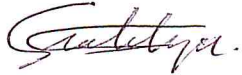
Response. It has been made according to the suggestions of the reviewer. Last paragraph, page 8. The table 1, has been added. Unfortunately, in our center is not given monitoring of TB to this type of patients.

Suggestion	I suggest that the authors add and update their references related to the topic tuberculosis and transplantation or stem cell transplant, at least put a figure to facilitate the understanding of topics such as the immunological aspects
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Response. Our references related to the topic TB and transplantation or stem cell transplant, are update, there are 2011-2013. The figure has been added. Second paragraph, page 13.

Thank you again for publishing our manuscript in the *World Journal of Clinical Infectious Diseases*.

Sincerely yours,

A handwritten signature in dark ink, appearing to read 'Guadalupe' followed by a stylized surname.

Guadalupe García-Elorriaga, PhD

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