

Ze-Mao Gong
Science Editor
Baishideng Publishing Group Inc

Dear Editor

Enclosed is a response letter that is about our manuscript entitled "Comparison of CT findings between bacteremic and non-bacteremic acute pyelonephritis due to *Escherichia coli*" Manuscript number 23822. We were asked to resubmit after making minor revisions; we have made appropriate changes as suggested by the reviewers and resubmitted an updated document with changes tracked. The following are our specific responses to the reviewer comments as well as Editor's suggestions:

- Reviewer (00506623)'s comments

The paper by Oh et al. describes a retrospective CT finding analysis of *Escherichia coli* pyelonephritis cases to predict bacteremic patients. The authors have presented the data well. Some minor revisions still need to be made to the paper.

Minor revisions 1. The paper has some English language issues to address. An example includes the eighth line of the discussion where some literatures should be some studies.

We changed "some literatures" to "some studies."

Minor revisions 2. There is a space between *E. coli*.

We inserted a space between *E. coli*.

Minor revisions 3. You need to include some more recent papers, particularly on bacteremia and *E. coli* urinary tracts infections.

We added a recent reference that we can find in pubmed.

- Reviewer (03340891)'s comments

MR imaging of renal infections continues to gain acceptance. It is especially useful in patients for whom exposure to radiation should be avoided (eg, pregnant and children) or for whom use of iodinated contrast material is contraindicated (eg, patients with a sensitivity to iodinated contrast agents, to avoid contrast nephropathy). I guess that contrast nephropathy is the most important problem in kidneys with APN. We know that they increase tubule-interstitial damage. MR imaging findings are similar to those of CT and include demonstration of renal edema, hemorrhage, renal enlargement, abscesses, and perinephric fluid collections. We know that CT is used only in special circumstances to diagnose in acute pyelonephritis. This is a retrospective study and We would like to learn from the authors; why didn't they use MR, instead of CT. Moreover, to exposure to radiation is not important, is it? Please make a statement.

We agree the reviewer's opinion that MR images for APN are comparable to CT images and MR have an important advantage of avoidance of ionizing radiation from CT. Unfortunately, in our retrospective cohort, number of patients who underwent CT was predominantly larger than that of patients who underwent MR, because of the convenience of CT exam. Recently, number of MR exams in the patients with suspected urinary tract infection are increasing. Therefore, we are expecting the researches involving MR images in the future.

- Editor's suggestions

1. TITLE

Author contributions

We corrected the format of authors' name.

2. INTRODUCTION

Abbreviations and acronyms

We defined abbreviations only the first time when we used them through the main text that was from introduction to the end of discussion. Actually, we used just a few abbreviations in this manuscript.

3. REFERENCES

Check the duplication of the same reference

We confirmed that there is no repeated references.

4. FIGURES

Provide the original figures as word or ppt files.

We submitted the ppt file.

Sincerely,

Bo-Kyung Je