

ANSWERING REVIEWERS



January 9, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 15287-review.doc).

Title: Pyuria in patients with Kawasaki disease

Author: Toru Watanabe

Name of Journal: *World Journal of Clinical Pediatrics*

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The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

Abstract

- (1) page 2, line 1-2: "an acute febrile" was added between "(KD) is" and "vasculitis" In addition, "predominantly develops in children ≤ 5 year of age and" was added between "that" and "can"
- (2) page 2, line 3: "pyuria is a common and specific" was changed to "sterile pyuria is a common"
- (3) page 2, line12: "As causative pathogens, Escherichia coli and Klebsiella oxytoca have been reported." was added.
- (4) page 2, line14: "such as vesicoureteral reflux" was added after "urinary tract abnormalities". "post-" was deleted. "including renal ultrasound, voiding cystourethrogram and/or dimercaptosuccinic acid renal scan" was added between "UTI workup" and "is"

Core tip

- (5) page 3, line 2: "" and specific" were deleted.
- (6) page 3, line 8: "post" was deleted.
- (7) page 3, line 8: "including renal ultrasound, voiding cystourethrogram and/or dimercaptosuccinic acid renal scan" were added after "UTI workup".

Introduction

- (8) page 4, line 8-15: "Although...(SMAD3)" were deleted. Reference 4 and 5 also were deleted.
- (9) page 4, line 19: "Kidney involvement" were changed to "Renal manifestations"
- (10) page 5, line 1: "complications" was changed to "manifestations".
- (11) page 5, line 3: ", defined as patients with fever ≥ 5 days but only 2 or 3 of the other KD criteria" were added after "incomplete KD"
- (12) page 5, line 20: Table 1 was added.
- (13) page 6, line 1 and 2: "filed" was correct to "field"
- (14) page 6, line 8: "specific" was changed to "common"

Clinical and laboratory characteristics of KD patients with sterile pyuria

- (15) page 6, line 10: "Pyuria is usually defined as > 5 leukocytes/high-power field or > 10 leukocytes/ μ l. Sterile pyuria is defined as pyuria with a negative urine culture. Sterile pyuria

can occur in various infectious or noninfectious disorders (Table 2).” were added in the text.

- (16) page 6, line 15: “patients without pyuria, patients with pyuria in both voided urine and bladder urine obtained by transurethral catheterization (bladder pyuria), and patients with pyuria only in voided urine (urethral pyuria)” were added in the text. “bladder pyuria” means that pyuria originates from above bladder level including the kidney, ureter and bladder.

Origin of pyuria in patients with KD

- (17) page 7, line 6: “Another study also” were changed to “A previous study”
(18) page 7, line 14-16: “with higher levels of urinary... voided urine specimens These result suggest” were deleted.
(19) page 7, line 19: “sometime” was deleted.
(20) page 8, line 8: lesions with inflammation” were changed to “inflammatory lesions”.

KD associated with urinary tract infection

- (21) page 9, line 11: “such as VUR” were added after “abnormalities”. “post-” was deleted. “including renal ultrasound, voiding cystourethrogram and/or dimercaptosuccinic acid renal scan” were added after “workup”.
(22) page 9, line 11-12: “It is unclear...with a UTIs” were deleted.

Conclusions

- (23) page 9, line 14: “and specific” were deleted.
(24) page 9, line 29: “post-” was deleted
(25) page 9, line 29-31: “It iswith UTI” were deleted.

Other point

- (26) There is no special practical examination for pyuria in KD. Usual examination for pyuria should be done. So I think flowchart for pyuria examination of KD is unnecessary.

3 References and typesetting were corrected

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

Sincerely yours,

Toru Watanabe, MD, PhD
Department of Pediatrics
Niigata City General Hospital
463-7 Shumoku, Chuo-ku
Niigata 950-1197, Japan
Fax: +81-25-281-5169
E-mail: twata@hosp.niigata.niigata.jp