



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_27298
Title of the Manuscript:	Clostridium Difficile infection in immunocompromised and non-immunocompromised Hosts – a single-center Experience
Type of the Article	Original Research Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
<u>Compulsory</u> REVISION comments	Overall, a lovely study of CDI in an Asian population stratified by immunocompromised versus non-immunocompromised.	
<u>Minor</u> REVISION comments	Revision of some of the language is necessary: 1. Abstract. Line 25 replace 'remarkable' with 'significant'? 2. Abstract line 27-28. Last sentence delete 'that adds information, etc' and replace with 'this paper'. 3. Methods, page 4. Description of your hospital is too repetitive. Delete 'situation in the ...New Territories'. Sufficient to say tertiary hospital in Hong Kong serving over 1 million patients. 4. Methods. Phrasing awkward throughout text for describing the CD diagnosis method. Suggest saying 'a positive PCR test for toxigenic C. difficile...' 5. Methods, page 4, line 75. 'with bowel open' is not a good English phrase. Revise to 'well-formed stool <3 bowel movements/day' 6. Page 5, Definition section. See comment 4. 7. Page 5, line 90. Revised to 'A CDI case was defined as a healthcare facility-related...' 8. Methods. Please find what authors mean by 'hostel' and how this facility is different than a hospital. Does this mean a long-term care facility? Hospice? 9. Methods, page 6, please provide citation for your PCR method and add that this is a PCR method when describing your kit. 10. Methods. Since authors state this was a well-powered	Thank you for your comments. 1. Corrected 2. Corrected 3. Corrected 4. Corrected 5. Corrected 6. Corrected 7. Corrected 8. Definition added 9. We have quoted the model and brand of the kit (LightMix Kit). There is no specific reference of the Kit but the full product information is readily available from internet through the company website. 10. sample size calculation added 11. corrected 12. corrected 13. corrected 14. corrected 15. corrected 16. corrected 17. amended 18. corrected 19. corrected



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	study, please give sample size calculation in methods. 11. Results, line 8, line 144. All patients have an immune status, please revise sentence by adding 'associated with an <i>altered</i> immune status,.' 12. Disease Outcomes, page 9., line 163. Please spell out DM. 13. Disease Outcomes, page 9, line 168-171. Unclear sentence. Do authors want to say 'clinicians took longer to diagnose CDI in the immunocompromised patients (mean....)' 14. In Results, risk factors for Mortality. Please revise text, as hostel residency is not significant (CI include 1.0) in multivariate model. Hostel is risk factor for recurrence only. 15. Page 11, Discussion line 197. Awkward sentence. Suggest '...mortality rate was 27.7%, which is similar to mortality rates reported in other countries.' Then provide some citations and rates here. 16. Discussion, page 11, line 204. Replace 'hostile' with 'severe'. 17. Discussion, page 12, line 209-213. These sentences are also unclear and awkward. Revise. 18. Discussion, page 12, line 219-220. Suggest revising to 'Increasing age, particularly over 65 years of age, is associated with...' 19. Discussion, page 12, line 224. Authors can just point out that older age was not a risk factor once other confounding factors were adjusted for in the multivariate model. 20. Discussion, page 13, line 229. Revise to 'treatment failure rate in the literature varies from 2%...' 21. Discussion, page 14. Please include a discussion of how 'hostel' patients may have less exposure to C. difficile spores? We find high rates of environmental contamination of CD spores in our long-term care	20. corrected 21. Actually we mean the 'hostel' patient (= patients living in long-term care facility) would have more exposure to CD spores, as quoted in the references 13, 32 (line 249). From line 249—251, what we mean is that in our cohort, less population of immunocompromised patients lives in long-term care facility but they 'still' develop CDI (more community-acquired infection). Sentence amended for better understanding 22. corrected 23. amended 24. agreed. it is tabulated just for easier reference 25. the similarities with and differences from Caucasians' studies have been given in the discussion e.g. line 195-198, line 220-223, line 229-230 ,etc
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	facilities. 22. Page 15,lines 271-274. Do not pool together the risk factors for mortality and recurrences as these turned out to be very different. Please provide risk factors in 2 sentences, separate by outcome. 23. Table 1. Please delete text on the bottom of the table (lines 413-416) as this is given in the main text. Please define all abbreviations in the footnote, not just a few. 24. I'm not sure you need Table 2, as this description could easily be given in the text under 'results'.... 25. Discussion-since this is the first study to describe CDI in a completely Asian population, can authors cite and describe how their outcomes were different or similar and give a few examples? This would be very interesting.	
<u>Optional/General</u> comments	Overall, nice description of Asian patients with CDI. The text needs some polishing on English language.	