Author's response to reviews

Title: Molecular detection of Treponema pallidum sp pallidum in blood samples of VDRL-seroreactive women with lethal pregnancy outcomes: A retrospective observational study in northern Brazil

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Author's response to reviews: see over
To: 
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Dear Dr. Norton,

I am posting today on the BMC Infectious Diseases site the second revision of our manuscript “Molecular detection of Treponema pallidum sp pallidum in blood samples of VDRL-seroreactive women with lethal pregnancy outcomes: A retrospective observational study in northern Brazil”. The manuscript has been revised according to the suggestions of the reviewers and we hope that it will now be acceptable for publication in BMC Infectious Diseases.

Yours sincerely,

M.Sc. Charliana Aragão Damasceno
Reviewer: Angèle Gayet-Ageron

COMMENTS

Major compulsory revisions

1. METHODS:
   - The suggestion of changing in the presentation of the methodology was accepted.
   - We adequately answered about the time at which the VDRL screening test was realized.
   - The considerations regarding statistical analysis are pertinent and the statistical tests were revised as suggested. In addition, the text was modified accordingly.

2. RESULTS
   - The suggestion was accepted.

3. DISCUSSION
   - The limitations of the study were carefully discussed as requested.

4. CONCLUSION
   - The corrections were made along the conclusion.

Minor Essential Revisions

1. All suggestions were accepted.
Reviewer: Achim Weber

COMMENTS

Major compulsory revisions

1) The results about the optimal PCR approach were mentioned.

2) In this retrospective study, unfortunately, no biological specimen of the conceptuses following neonatal death (peripheral blood), stillbirth and abortion (paraffinized placental tissue or autopsy material) was available for analysis by PCR. However,

3) It is important to note that, when reviewing the records of the women studied, information regarding the diagnosis/treatment of maternal syphilis, weight of the conceptus at birth and gestational age at lethal outcome was available in 19 cases, data that are used by the Ministry of Health as criteria for the definition of cases of abortion and fetal death (stillbirth) due to syphilis. Thus, even in the absence of a clinical-laboratory diagnosis of CS of the conceptus, five cases of abortion and 14 cases of stillbirth should be defined as abortion and fetal death (stillbirth) due to syphilis according to the definitions of the Brazilian Ministry of Health [1]. This is supported by the complementary results of ELISA and PCR, which were positives in 16 samples of peripheral blood of this group of women.

4) DNA from one control sample (VDRL/ELISA IgG-seronegative) was included as a negative control and their results now are shown.

REFERENCES