Jundishapur Journal of Microbiology
Volume 16 · Issue 4 · e135726

OPEN PEER REVIEW

Distribution of Class A Extended-Spectrum β-Lactamases Among *Pseudomonas aeruginosa* Clinical Strains Isolated from Ardabil Hospitals

Fereshteh Hasanpour, Nima Ataei, Amirhossein Sahebkar, Farzad Khademi

SUBMITTED	REVISED	ACCEPTED	DOI
15 Feb 2023	13 May 2023	21 May 2023	10.5812/jjm-135726

About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

More about open peer review: brieflands.com/knowledgebase/opr

Contents

1 **Original submission** Referee 1, Amirhooshang Alvandi, Associate Editor 2
2 **Revision 1** 4
Authors' reply to reviewers 5
Reviewer and editor comments 9
3 **Revision 2** 10
Authors' reply to reviewers 11
Reviewer and editor comments 15

1 Original submission

3 comments · 3 Apr 2023 – 18 Apr 2023

Referee 1 Reviewer

ACCEPT 3 Apr 2023

The present manuscript on the prevalence of class A extended-spectrum β-lactamases among Pseudomonas aeruginosa clinical isolates is an epidemiological study. Such studies can help control the spread of drug-resistant bacteria in healthcare settings and support infection control. However, at the same time, it is not innovative and does not add to the existing information.
Since the manuscript is well written and there are no problems except for a few points mentioned in the Word file, it is the editor's responsibility to publish it.

Amirhooshang Alvandi Reviewer

MAJOR REVISION 11 Apr 2023

Title of article: Prevalence of class A extended-spectrum β-lactamases among Pseudomonas aeruginosa clinical isolates
1- Regarding the review of similar titles, it should be noted that a large number of similar titles were found in a Google search.
2- The title is not complete and does not mention the place and year.
3- The abstract has a good structure, but the conclusion is not related to the presented results.
4- The introduction failed to reflect the novelty of the study.
5- The clinical specimen is unspecified, and no definition of infection has been provided.
6- No reference has been provided for the phenotypic detection of ESBL.
7- The accession numbers mentioned (OQ024009 to OQ024015) do not exist in GenBank.
8- The methods for identifying the characteristics of ESBL-positive isolates mentioned in Table 2 are not specified in the materials and methods section.
9- The differences and similarities between the results and those of other studies are not explained in the discussion.
10- The conclusion is not related to the results mentioned.

Associate Editor

MAJOR REVISION 18 Apr 2023

Reviewer`s Comment #1: Accept
• Original
Public Comment:
The present manuscript about the Prevalence of class A extended-spectrum β-lactamases among Pseudomonas aeruginosa clinical isolates is an epidemiological study. Such studies can help control the spread of drug-resistant bacteria in healthcare settings and support infection control. However, at the same time, it is not innovative and does not provide more information than is already available.
Since the manuscript is well written and there are no problems except for a few points mentioned in the Word file, it is the editor's responsibility to publish it.
Decision:
Accept

• Title of article: Prevalence of class A extended-spectrum β-lactamases among Pseudomonas aeruginosa clinical isolates

1- Regarding the review of similar titles, it should be noted that a large number of similar titles were found in a Google search.

2- The title is not complete and does not mention the place and year.

3- The abstract has a good structure, but the conclusion is not related to the presented results.

4- The introduction failed to reflect the novelty of the study.

5- The clinical specimen is unspecified, and no definition of infection has been provided.

6- No reference has been provided for phenotypic detection of ESBL.

7- The mentioned accession numbers (OQ024009 to OQ024015) do not exist in GenBank.

8- The methods for identifying the characteristics of ESBL positive isolates mentioned in Table 2 are not specified in the material method section.

9- The differences and similarities between the results and those of other studies are not explained in the discussion.

10- The conclusion is not related to the mentioned results.

Decision:

Major revision

AE Reviewer`s Comment and Decision: Major Revision

1. In the introduction section, reference # 6 refers to the WHO report, while in the method section, this reference is attributed to the corresponding author. Which of them is correct?

2. What phenotypic tests were performed for the identification of the collected isolates?

3. The names of the Ardebil hospitals from which the isolates were collected are not mentioned in the method section.

4. Please cite the references used for PCR, electrophoresis, and other tests.

5. It is necessary to mention the names of the positive and negative controls used for the PCR method in the method section and present them in Figure 1.

2

Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

RESPONSES TO THE EDITOR'S COMMENTS: (Manuscript ID: 135726),

Prevalence of class A extended-spectrum β-lactamases among *Pseudomonas aeruginosa* clinical isolates

Dear editor and reviewers,

We are pleased to have been given the opportunity to revise our manuscript. Thank you for advices, which will help us improve it to a better scientific level. We have revised the manuscript according to the editor's report and reviewer's comments and the suggested changes have been carefully addressed. We believe that the manuscript is improved after making the suggested revisions and hope our revisions are sufficient to make the manuscript acceptable for publication.

Thank you in advance for your consideration of our manuscript in your important journal.

Best regards

Reply to the reviewers' comments

Reviewer Number	Original comments of the reviewer	Reply by the author(s)	Changes done on page number and line number
1	The present manuscript about the Prevalence of class A extended-spectrum β-lactamases among Pseudomonas aeruginosa clinical isolates is an epidemiological study. Such studies can help control the spread of drug-resistant bacteria in healthcare settings and infection control. However, at the same time, it is not innovative and does not provide more information than the existing information. Since the manuscript is well written and there are no problems except for a few points mentioned in	Thank you for the valuable comments.	Highlighted

	the Word file, it is the editor's responsibility to publish it.		
2	Title of article: Prevalence of class A extended-spectrum β-lactamases among Pseudomonas aeruginosa clinical isolates 1- Regarding the review of similar titles, it should be noted that a large number of similar titles were obtained in Google search.	Title was changed.	Highlighted
2	2- The title is not complete and does not mention the place and year	Title was changed.	Highlighted
2	3- Abstract has a good structure but the conclusion is not related to the presented results	Conclusion was changed.	Highlighted
2	4- The introduction failed to reflect the novelty of the study.	We have sufficiently mentioned the clinical importance of the presence of these enzymes along with the lack of any information about their prevalence in Ardabil which is the novelty of the study.	
2	5- The clinical specimen is unspecified, and no definition for infection has been provided.	Clinical specimen type was added in the results section.	Highlighted
2	6- No reference has been provided for phenotypic detection of ESBL.	Reference number 13	Highlighted
2	7- mentioned accession number (OQ024009 to OQ024015) does not exist in the GenBank	The scheduled release date for OQ024009 to OQ024015 accession numbers was Apr 22, 2023. Now they are available in the GenBank.	
2	8- The methods for identifying the characteristics of ESBL positive isolates mentioned in Table 2 are not specified in material method section.	Data on virulence genes and antibiotic resistance profiles in Table 2 are based our previous studies. Related methods for	

		identifying these characteristics in ESBL positive isolates are presented in separate articles. Some of these data is published and some others not. Related references are available.	
2	9- The differences and similarities of the results with other studies are not explained in discussion.	We checked again and think that comparison of our results with similar studies in inside and outside of the country is presented enough in the discussion section.	
2	10- Conclusion is not related to mentioned results	Conclusion was changed.	Highlighted
3	1. In the introduction section, reference # 6 is referred to the WHO report, while in the method section, this reference is attributed to the corresponding author. Which of them is correct?	Related references number were changed.	Highlighted
3	2. What phenotypic tests were performed for the identification of the collected isolates?	Phenotypic tests were added.	Highlighted
3	3. The names of Ardebil hospitals from which the isolates were collected, are not mentioned in the method section.	Hospitals names were added.	Highlighted
3	4. Please cite the used references for PCR, electrophoresis, and other tests.	References were added.	Highlighted
3	5. It is necessary to mention the names of the positive and negative controls used for the PCR method, in the method section and present them in Figure 1.	Clinical isolates of *Klebsiella pneumoniae* and *P. aeroginosa* ATCC 27853 carrying class A ESBLs-encoding genes were used as positive control strains. Additionally, the results were confirmed through DNA sequencing. A PCR Master Mix plus nuclease-free	Highlighted

		water was used as negative control. These data added in the method section and Figure 1 caption.	

2 Revision 1

0 comments

No public comments in this round.

3

Revision 2

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

RESPONSES TO THE EDITOR'S COMMENTS: (Manuscript ID: 135726),

Prevalence of class A extended-spectrum β-lactamases among *Pseudomonas aeruginosa* clinical isolates

Dear editor and reviewers,

We are pleased to have been given the opportunity to revise our manuscript. Thank you for advices, which will help us improve it to a better scientific level. We have revised the manuscript according to the editor's report and reviewer's comments and the suggested changes have been carefully addressed. We believe that the manuscript is improved after making the suggested revisions and hope our revisions are sufficient to make the manuscript acceptable for publication.

Thank you in advance for your consideration of our manuscript in your important journal.

Best regards

The Authors

Reply to the reviewers' comments

Reviewer Number	Original comments of the reviewer	Reply by the author(s)	Changes done on page number and line number
1	The present manuscript about the Prevalence of class A extended-spectrum β-lactamases among Pseudomonas aeruginosa clinical isolates is an epidemiological study. Such studies can help control the spread of drug-resistant bacteria in healthcare settings and infection control. However, at the same time, it is not innovative and does not provide more information than the existing information.	Thank you for the valuable comments.	

	Since the manuscript is well written and there are no problems except for a few points mentioned in the Word file, it is the editor's responsibility to publish it.		
2	Title of article: Prevalence of class A extended-spectrum β-lactamases among Pseudomonas aeruginosa clinical isolates 1- Regarding the review of similar titles, it should be noted that a large number of similar titles were obtained in Google search.	Title was changed.	Highlighted Page 1 Line 1
2	2- The title is not complete and does not mention the place and year	Title was changed.	Highlighted Page 1 Line 1
2	3- Abstract has a good structure but the conclusion is not related to the presented results	Conclusion was changed.	Highlighted Page 1 Lines 22-26
2	4- The introduction failed to reflect the novelty of the study.	We have sufficiently mentioned the clinical importance of the presence of these enzymes along with the lack of any information about their prevalence in Ardabil which is the novelty of the study.	-
2	5- The clinical specimen is unspecified, and no definition for infection has been provided.	Clinical specimen type was added in the results section.	Highlighted Page 5 Lines 1-8
2	6- No reference has been provided for phenotypic detection of ESBL.	Reference number 13	Highlighted Page 2 Line 42
2	7- mentioned accession number (OQ024009 to OQ024015) does not exist in the GenBank	The scheduled release date for OQ024009 to OQ024015 accession numbers was Apr 22, 2023. Now they are available in the GenBank.	-

2	8- The methods for identifying the characteristics of ESBL positive isolates mentioned in Table 2 are not specified in material method section.	Data on virulence genes and antibiotic resistance profiles in Table 2 are based our previous studies. Related methods for identifying these characteristics in ESBL positive isolates are presented in separate articles. Some of these data is published and some others not. Related references are available.	-
2	9- The differences and similarities of the results with other studies are not explained in discussion.	We checked again and think that comparison of our results with similar studies in inside and outside of the country is presented enough in the discussion section.	-
2	10- Conclusion is not related to mentioned results	Conclusion was changed.	Highlighted Page 8 Lines 1-5
3	1. In the introduction section, reference # 6 is referred to the WHO report, while in the method section, this reference is attributed to the corresponding author. Which of them is correct?	Related references (reference 7) number were changed.	Highlighted Page 1 Line 44
3	2. What phenotypic tests were performed for the identification of the collected isolates?	Phenotypic tests were added.	Highlighted Page 2 Lines 31-34
3	3. The names of Ardebil hospitals from which the isolates were collected, are not mentioned in the method section.	Hospitals names were added.	Highlighted Page 2 Lines 29-30
3	4. Please cite the used references for PCR, electrophoresis, and other tests.	References were added.	Highlighted Page 3 Lines 8, 10 and 16
3	5. It is necessary to mention the names of the positive and negative controls used for the PCR method, in the method section and present them in	Clinical isolates of *Klebsiella pneumoniae* and *P. aeroginosa* ATCC 27853 carrying class A ESBLs-encoding	Highlighted Page 3 Lines 16-19

	Figure 1.	genes were used as positive control strains. Additionally, the results were confirmed through DNA sequencing. A PCR Master Mix plus nuclease-free water was used as negative control. These data added in the method section and Figure 1 caption.	Page 5 Lines 29-30

3 Revision 2

0 comments

No public comments in this round.