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Breast hypertrophy and gynaecomastia in HIV-associated lipodystrophy, a problematic side-effect of life-saving antiretroviral therapy

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2014
http://hdl.handle.net/10539/15467

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Corrections of MMED titled: Breast hypertrophy and Gynaecomastia in HIV-associated Lipodystrophy, a problematic side-effect of life-saving antiretroviral therapy

Page V line 5: Replaced 'We' with 'This study'

Page V line 20: Replaced 'We' with 'This study'

Page Vi line 5: Replaced 'Dr. C Menezes, Dr. C Serrurier, Dr. S Takuva and Prof. I Sanne who are the co-authors who are involved in the publication of the article, I thank them for their contributions.' with 'Dr. C Menezes, Dr. C Serrurier, Dr. S Takuva and Prof. I Sanne who are the co-authors involved in the publication, I thank them for their contributions'

Page Vii – Xi: Page numbers reformatted

Page Viii, line 15: 'Aim of study' changed to 'Aims of study'

Page XiV, line 6: Changed 'The first line therapy' to 'First line therapy'

Page 4, line 15: Changed 'One of the earliest reports of d4T-related lipodystrophy compared the prevalence of lipodystrophy among patients on d4T-based regimens, at 63% to patients on zidovudine (AZT) -based regimens at 18,75%' to
One of the earliest reports of d4T-related lipodystrophy compared the prevalence of lipodystrophy among patients on d4T-based regimens (63%), to patients on

zidovudine (AZT) -based regimens (18,75%).

Page 6, line 3: Changed ‘Host factors include advanced age, female sex, greater nadir of CD4+ count (<350) and higher viral load (>100,000 copies/ml) at commencing HAART, higher baseline triglyceride levels and coinfection with hepatitis C.’ to Host factors include advanced age, female sex, greater nadir of CD4+ count (<350), higher viral load (>100,000 copies/ml) at the onset of HAART, higher baseline triglyceride levels and coinfection with hepatitis C.

Page 10, line 17:

‘Aim of Study’ changed to ‘Aims of Study’.

Page 13, line 17:

‘We estimated crude and adjusted hazard ratios of progression to lipodystrophy using Cox proportional hazards models’ changed to ‘An estimation of crude and adjusted hazard ratios of progression to lipodystrophy using Cox proportional hazards models was made.’

Page 16

Table 2 has been placed on a separate page

Page 19

Figure 1 has been placed on a separate page

Page 23

Figure 2 has been placed on a separate page

Page 24

Figure 3 has been placed on a separate page

Page 26:

Figure 4 has been placed on a separate page

Page 27: What has the hazard ratios been adjusted for? The effect of d4T on lipodystrophy was adjusted for gender. The effect of gender on lipodystrophy is adjusted for d4T use.

Page 28, line 20: ‘We’ has been replace with ‘I’

Page 28, line 22: ‘In our’ has been replaced with ‘In this’

Page 29, line 24: ‘In our setting’ has been replaced with ‘In the Themba Lethu setting’

Page 30, line 1: ‘We’ replaced with ‘I’

Page 30, line 2: ‘Our’ replaced with ‘this’

Page 30, line 5: ‘European, Australian and American studies looking at the prevalence

of lipodystrophy have cohorts that are predominantly male. African cohorts such as the study performed in Benin, and our cohort have predominantly female participants.' replaced with '*Baril et al*, and *Miller et al* present studies of European, Australian and American cohorts that examine the prevalence of lipodystrophy in these population groups. They utilise cohorts that were predominantly male. African cohorts such as the study performed in Benin, and the Themba Lethu cohort have predominantly female participants.'

Page 30, line 40: 'Our' has been changed to 'this'

Page 31, line 1: 'Around' was changed to 'When body mass was assessed'

Page 33, line 22: 'To our knowledge' was changed to 'At the time of writing'

Page 36, line 2: 'our' was changed to 'this'

Page 36, line 4: 'our' was changed to 'in the Themba Lethu'

Page 36, line 6: 'we were' is changed to 'this study is'

Page 38, line 3: 'In our study, we found' was changed to 'This study found'

Page 38, line 5: 'Our data' was changed to 'This data'

Page 39, line 1: Chapter 5 starts on a new page

Page 39, line 2:' The study was limited to 3 months of data collection. We had initially planned to interview 1000 patients and this was calculated according to an initial 3-day pilot study. Unfortunately, we had not factored into our calculations that the clinic closed early on Fridays and closed in mid-December for year-end holidays.' Was changed to 'The study was limited to 3 months of data collection. I had initially hoped to interview 1000 patients and this was calculated according to an initial 3-day pilot study. Unfortunately, I had not factored into my calculations that the clinic closed early on Fridays and closed in mid-December for year-end holidays.

Page 40, line 1: 'We' was changed to 'I'.

Page 41, line 16: 'In a busy clinic setting, lipodystrophy may be difficult to diagnose and clinically significant cases may be missed by physicians not looking for this side-effect.' Has been added to the conclusions

Page 42, line 12: 'Highly sensitive and specific, non-invasive screening methods for diagnosing lipodystrophy in a busy clinic setting need to be developed so that early diagnosis and management of these patients can be instituted.' has been added to recommendations

Pg 44, line 2: '[http://www.doh.gov.za/docs/misc/2004/sect1.pdf]' to '[http://southafrica.usembassy.gov/media/2004-doh-art-guidelines.pdf]'