Reviewer's report

Title: Use of local anaesthetics and adjuncts for spinal and epidural anaesthesia and analgesia at German and Austrian University Hospitals: An online survey to assess current standard practice

Version: 4 Date: 24 January 2010

Reviewer: Dan Benhamou

Reviewer's report:

To the Editor,

Thank you for providing me the opportunity to review this revised version. Frankly, I do not see major changes and improvements. Authors have agreed with most of my remarks but almost none has led to a change in the manuscript.

For example, one of my first questions tries to understand who answered the questionnaire and how were the answers provided (intuitive knowledge of the responder or based on review from a local database). This is not answered. Moreover, the whole questionnaire asks questions related to the « preferred » technique in a given institution. I understand that given the structure of the questionnaire, the authors are unable to answer to this basic question but we still do not know which percentage of a given surgical procedure is included in the response. This should however be acknowledged as a significant weakness. We still do not know why only academic institutions were questioned. What percentage of surgical activity do these structures represent in Austria and Germany? Do these results reflect a large part of German and Austrian practice? These are only examples of unanswered questions that remain in the revised version.

The authors will also find below several minor comments that require some change in the manuscript. I have not been in depth through the manuscript but I have only selected some specific remarks.

Results (top of page 6): the sentence indicating that 33 out 39 hospitals represent 15 % is wrong and should be modified.

In the Discussion section, the change in the sentence regarding bupivacaine toxicity remains flawed. Indeed, the main drawback of bupivacaine (or of ropivacaine) administered spinally is not cardiac toxicity: the main problem is sympathetic blockade and the ensuing risk of hypotension. Cardiac stability should thus evoke the problem of hypotension, not of cardiotoxicity. The sentence should be rephrased.

Tables remain hard to read and lack synthesis.

Ref 17 refers to an article which is not a major study on ropivacaine cardiac toxicity. Please use a more easily available paper.

Ref 28 and 30 describe the same article.
I do not want to give the impression that I am trying relentlessly to reject this paper. I am not convinced by the usefulness of the data presented and I let the Editor-in-Chief decide what to do with the article.

Sincerely

Pr Dan Benhamou

**Level of interest:** An article of limited interest

**Quality of written English:** Needs some language corrections before being published

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests