Reviewer’s report

Title: Evaluation of delivery of enteral nutrition in mechanically ventilated Malaysian ICU patients

Version: 3 Date: 25 August 2014

Reviewer: Arthur Van Zanten

Reviewer’s report:

When assessing the work please consider the following points:

1. Is the question posed by the authors well defined? Not very well.
2. Are the methods appropriate and well described? Poorly described.
3. Are the data sound? Yes, but uncommon end points and many missing variables.
4. Does the manuscript adhere to the relevant standards for reporting and data deposition? Not yet, major revisions necessary.
5. Are the discussion and conclusions well balanced and adequately supported by the data? Not in its present form; see my comments.
6. Are limitations of the work clearly stated? Yes, some have to be added.
7. Do the authors clearly acknowledge any work upon which they are building both published and unpublished? Yes.
8. Do the title and abstract accurately convey what has been found? Yes.
9. Is the writing acceptable? No language editing necessary.

Please make your review as constructive and detailed as possible in your comments so that authors have the opportunity to overcome any serious deficiencies that you find and please also divide your comments into the following categories:

- Discretionary Revisions (which are recommendations for improvement but which the author can choose to ignore)
- Minor Essential Revisions (such as missing labels on figures or the wrong use of a term which the author can be trusted to correct)
- Major Compulsory Revisions (which the author must respond to before a decision on publication can be reached)

In fact all my comments are major and compulsory revisions.

My comments:

The doctors Keng F Yip, Vineya Rai*, Kang K Wong have to be commended to submit an evaluation of Malaysian ICU nutrition practices foro reviews. The paper is titled: Evaluation of delivery of enteral nutrition in mechanically ventilated Malaysian ICU Patients.
However, several major issues have to be addressed.

1. the study is rather small and observational in design. This precludes firm conclusions.
2. From other countries much information is already available on this topic.
3. The Quality of English should be improved by a language editor.
4. For primary and secondary endpoints no clear and common end points were used. This makes comparison to other papers rather difficult. I suggest to use more common end points such as energy target and achieved target on day 1, 2, 3 and mean dureing ICU stay.
5. Same could be done for protein intake: target and achievements per day and ICU stay.
6. Nr 5 and 6 could also be inserted into a graph with 95%CI.
7. The authors state: About 68 % of patients achieved 80 % of caloric requirements within 3.29 days, 46.8 % achieved full feeds in less than 12 hours while 15.6 % did not achieve full feeds. These are unacceptable end points. Split in energy and proteins. And at 3.29 days is uncommon. See also comments 5 and 6.
8. 1.82 days ± 1.478. I believe this should not be reported with this kind of accuracy. 1.8 and 1.5 would be better.
9. Nutritional inadequacy in mechanically ventilated Malaysian patients receiving enteral nutrition was not as common as expected. What was expected? There is no preassumption when the research questions were mentioned.
10. In the Introduction a pediatric study in mentions. This paper is on adults. Many studies on stoppage in adult ICU patients have been published. Use a paper on adults.
11. Only inclusions are mentioned at the resulst. Also mention how many exclusions and some characteristics. How many patients of the to ICU patients in the observation period were included.
12. No information is available on SPN/TPV use in these patients?
13. No information is available on non-feeding calories (propofol, glucose/dextrose etc.)
14. Patient characteristics: Report also BMI not only weight.
15. Many variables show skewed districution some examples in table 1: Time to start. Skewed distribution. Report as median + 95%CI.
16. Report Start within 24 , 48 and 72 hours. Patients on target after 72h.
17. In the discussion use more focus to discuss the results of the present study related to other papers. No other information on non-relevant issues should be inserted. Example: Why report on BSI, when this was not recorded in this study?
18. Line 169 discussion add reference Villet and coworkers.
19. Line 189 on aspiration this is a result should be mentioned in the results
section.

20. Table 1 SAPS skewed, report as median and 95%CI

21. All data on feeding should be inserted into a new table: target for energy, target for proteins, intake feeding energy, intake feeding proteins, intake non-feeding calories.

22. All data on GRV, route of feeding (NG, ND, NJ, PEG, parenteral) diarrhea, intolerance, stoppages and reasons should be presented in a table and discussed in the discussion section.