Reviewer's report

Title: Effects of epidural lidocaine analgesia on labor and delivery: a randomized, prospective, controlled trial

Version: 3 Date: 3 October 2006
Reviewer: Stephen Halpern

Reviewer's report:

General. The purpose of this randomized trials was to determine whether or not epidural analgesia influenced the course of labour and delivery in primiparous patients. Patients were assigned by alternate numbers to either receive epidural analgesia with lidocaine or intravenous meperidine. The authors found that there was no difference in the length of first or second stage of labour.

As a general comment, randomization by alternate numbers is not the strongest way of assigning patients. A coin flip or computer-generated random number list (viewed at the time of analgesia assignment) would be stronger. However, in this case, the demographics seem to be similar in both groups. A second comment, the method of supplying epidural analgesia is not "generalizable" to many settings and this limits the applicability of the results.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

A measure of analgesia should be described for both groups.
The incidence of complications (dural puncture, incomplete analgesia, nausea, vomiting, urinary retention, incidence of fever) should be included.
The rate of cervical dilatation was analyzed but not reported.

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
The discussion is a little long and rambling. However, I applaud the authors for putting the issue into the context of developing world and ethnic variances in practice.
The phrase "In my idea" which occurs several times, should be replaced with "perhaps". Also the term "fine obstetric management" p 10, is inappropriate as it suggests that in other studies the management was not "fine".
One small point: The study by Leighton et al was a meta-analysis, not a single study. Within that review the study by Bofil makes specific reference to resident training.

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Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of limited interest

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

Statistical review: No