Reviewer's report

**Title:** Identifying Systematic Reviews of the Adverse Effects of Health Care Interventions

**Version:** 1  **Date:** 9 November 2005

**Reviewer:** Sheena Derry

**Reviewer's report:**

**General**
The findings of this study are disappointing, but perhaps not unexpected to those who have tried to review the literature on adverse effects. The research question is somewhat academic as I can think of few situations in which one would do this particular search in practice – usually one has a particular disease state, intervention of adverse effect in mind. That said, the present situation is not acceptable. Every systematic review with adverse effect(s) as a primary outcome should be indexed with appropriate term(s). To achieve this will require authors to think carefully about the words used in the title, abstract and keywords, and indexers to be more consistent. I hope that studies such as this will draw attention to the problem, and stimulate discussion about how to improve the situation.

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

None

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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)**

1. Results, para 2. "...strategies also identified.." remove "also". 
   "...were identified. 256 from..." replace full stop with colon.
2. Results, para 3. "Only 2 of the 21 contained..." should read "2 of the 13".
3. Limitations of the study, para 3. "... the papers(n=21)" should read "(n=13)"
4. Table 2. EXP PRODUCT ... should read Exp PRODUCT
5. Table 4. 'adverse effects' (floating subheading) final "s" and ' sometimes missing
6. Table 1 uses lower case for all floating subheadings, but thereafter the formatting inconsistently starts with upper case.
7. Bibliography. Ref 6 has formatting errors and no editors.

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**Discretionary Revisions (which the author can choose to ignore)**

In my experience, the terms “sensitivity” and “precision” are not intuitive to many. They need to be defined in the text (Cochrane Glossary of Terms has definitions), not just presented as a calculation.

**What people really want to know is:**
• How many of the relevant studies have I retrieved?
• How many irrelevant studies have I also retrieved?

Clearly the answers are contained in the measures of sensitivity and precision, but it would help to make the paper more accessible to more readers if there were a sentence or two explaining the relationship.

**What next?:** Accept after discretionary revisions
Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I declare that I have no competing interests