Reviewer’s report

Title: S-carboxymethylcysteine in the treatment of glue ear: quantitative systematic review

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Reviewer: Dr Christopher Cates

Level of interest: not specified

Advice on publication: Other (see below)

1. I do not understand why the term acute otitis media is used in this review. Glue ear (or chronic serous otitis media) and is a different clinical entity. It develops in some children following acute otitis media, but I do not think that the authors are advocating treating children with acute otitis media, or that any of the trials looked at this.

2. My question about how the data was combined may seem silly to the authors but there is still no detail at all in the paper as to how the pooled NNT is compiled. Presumably (?) it is by pooling the risk difference from each trial (weighted by the inverse of its variance) and then taking the inverse of the pooled risk difference as the pooled NNT. Granted the raw data is conveniently displayed in Table 2 so others can make their own calculations, but I still feel that the authors could usefully explain how the pooled NNT is generated, rather than assume that the reader will know. The references do not explain the pooling mechanism used.

3. Is heterogeneity assessed by visual means alone? If Q statistics have been generated it would be useful to know what they are (in spite of the low power of the test).

4. The issue of children and ears is not that the results are different but that if the responses in both ears in one child are correlated the confidence intervals for the ears results will be too narrow. In practice however this may not be of much consequence as the data from children alone shows significant benefit.

Competing interests:

None declared.