Reviewer's report

Title: Chronic fatigue syndrome after Giardia enteritis: clinical characteristics, disability and long-term sickness absence.

Version: 3 Date: 16 June 2011

Reviewer: Peter White

Reviewer's report:

I have read the revised report, but I am afraid to say there are still major methodological problems with this report.

1. The authors use the denominator of 1262 patients, when the real denominator is 96.

2. The authors say they used the Reeves et al criteria for diagnosing CFS, but this recommends using a standardised psychiatric interview, which they did not do. A HADS scale does not, for instance, measure recent history of psychiatric disorders, which is necessary to make a CDC diagnosis of CFS. The authors continue to use the wrong threshold for judgement of clinical depression and anxiety of 15. The original authors of the HADS clearly state it is 8-10 for borderline and 10+ for clinically significant mood disorders on the two sub-scales. With this standard of measurement, not complying with CDC criteria, I cannot be confident that the 56 patients did have CFS.

3. Their main aim is to describe the phenotype of CFS after giardiasis, but they make no empirical analysis of the phenotype.

4. The relationship between giardiasis and CFS cannot be assumed to be causative when there is a delay in development of CFS after infection of months.

5. The fundamental problem is that the authors explicitly interpret their data as though it was an epidemiological study of the relationship between giardiasis and CFS, when it is not. The authors overinterpret what is essentially a case series of patients who have been referred to a hospital for fatigue some time after contracting giardiasis.

Level of interest: An article of limited interest

Quality of written English: Acceptable

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

Declaration of competing interests:

I advise the UK government and a re-insurance company about disability related to medically unexplained symptoms and mental health.