Reviewer’s report

**Title:** Crystalloid or colloid boluses for the management of dengue shock syndrome in the presence of ascites and pleural effusions?

**Version:** 1 **Date:** 13 August 2010

**Reviewer:** Po-Liang Lu

**Reviewer’s report:**

The article entitled “Crystalloid or colloid boluses for the management of dengue shock syndrome in the presence of ascites and pleural effusions?” asked an interesting question in the management of dengue shock syndrome.

**Major Compulsory Revisions**

The authors presented 3 DSS cases in different severity degrees who had mortality or morbidity due to pulmonary edema. However, the fluid overload could be related to DSS itself but not necessarily to be due to crystalloid fluid used.

The cases received not only crystalloid but also colloid fluids therapy.

Without a control group using colloid fluid only, it is hard to test the hypothesis that colloid fluid is more suitable than crystalloid fluid.

Although 3 DSS cases with poor outcome are reported, it is not reported whether DSS cases with good outcome also received similar fluid therapy.

**Minor Essential Revisions**

It would be good to provide references or data about the incidence rate of pulmonary edema in accordance to WHO fluid management guidelines among DSS cases.

Are there references for “Many deaths were thought to be due to inappropriate fluid management leading to fluid overload, in addition to myocarditis related cardiac failure and acute hepatic failure.”

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

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

**Declaration of competing interests:**

I declare that I have no competing interests.