Reviewer's report

Title: Pulmonary Tuberculous: Symptoms, diagnosis and treatment. 19-year experience in a third level pediatric hospital

Version: 2  Date: 31 December 2013

Reviewer: Nathan Kapata

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Major Compulsory Revisions

The methods used in the study are appropriate since it was a retrospective review of clinical files. However, the authors have not described in full and detail a number of issues that are important for the reader to understand. For example:

1. The setting of the study is not well described, is the National Institute of Pediatrics (NIP) a referral hospital? What types of patients are referred to the hospital and from where? What numbers of patients are seen at this hospital annually?

2. The pediatric age used in the study is below 18 years, however, the WHO figures quoted here and in most studies, the age group used for pediatric TB is below 15 years. Can the authors justify the use of this age group when referring to pediatric TB?

3. The authors have used some abbreviations which they have not explained such as BAAR for diagnosis, can they clarify what this is and how is it used as a diagnostic method? If they mean isolation of acid-alcohol resistant bacillus they should indicate that and mention what methods specifically were employed. How was the quality assurance conducted?

4. What were the culture methods used for diagnosis and how where samples collected? What were the issues with quality assurance for whatever culture method which was applied?

5. PCR is not mentioned as a method for diagnosis but is later mentioned in the results section. Can the authors clarify if this was also used for diagnosis and how were cases classified if diagnosed by PCR?

6. The authors should also describe the treatment regimens that were used during this period in the methods section, including any changes that occurred over the period in treatment regimens.

7. In the results Section the authors indicate that they identified statistically significant differences in relation to expectoration, haemoptysis, consolidation, caverns, calcification, mediastinal lymph nodes, BAAR and with pleural effusions but there is no clear statistical analysis or methods shown to indicate significant differences in the stated table 4, except proportions.
Minor Essential Revisions

The question posed by the authors is well defined and important as it addresses the issue of pediatric TB which is a major public health problem and has had limited attention until just recently.

8. However, clarity has to be made on the objective: in the abstract, the authors state that the, “objective of the present study is to know the real situation of PTB in the population of children in terms of its diagnosis and treatment in a third level pediatric hospital”, but then in the introduction they state that, “the objective of the study is to evaluate the clinical, radiological, microbiological and immunological spectra of pulmonary tuberculosis……..”. Can the authors be clear and consistent with the objective of the study?

9. The third sentence in the abstract, third line, which reads, “However, the difficulty in diagnosis of TB in children, scanty…….” Is not clear and should be rephrased.

10. The title and the abstract do not convey what was found, for instance, the abstract conclusion does not capture what the objective of the study was about.

11. Figure 1 is not labelled on the "Y" and "X" axes

12. The discussion and conclusion is not well balanced in relation to the title.

13. some grammatical errors need to be attended to e.g. the first sentence in the results section.

Level of interest: An article whose findings are important to those with closely related research interests

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

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:

I declare that I have no competing interests