Reviewer’s report

Title: Shorter courses of parenteral antibiotic therapy do not appear to influence response rates for children with acute hematogenous osteomyelitis: a systematic review

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Reviewer: Dr David Bamberger

Level of interest: A paper of considerable general medical or scientific interest

Advice on publication: Accept after discretionary revisions

The authors have performed a systematic review of antimicrobial therapy for children with acute hematogenous osteomyelitis. The problems with the study include:

1. The definitions of long course being greater than 1 week, and short course of less than one week are arbitrary. The paper does not report the duration of parenteral therapy for each study (could we only be comparing 6 days vs 8 days?)

2. Table 2 was difficult to follow. The parenteral antimicrobial was listed, but the oral antimicrobial was not. Further some antimicrobials such as cephradine and cephalexin were listed as parenteral, when they are oral drugs. What would have been more helpful to the reader is to state the oral regimen and how long it was administered, and the parenteral regimen, and how long it was administered.

3. What may be more important than if a drug is parenteral or oral is the type of antimicrobial, and how well it is absorbed, and what is its activity against the microbe. Clearly in adult osteomyelitis, there is little rationale to give quinolones parenterally, since they are well absorbed orally.

Competing interests:

None declared.