Reviewer’s report

Title: Patterns of Schistosoma haematobium infection, impact of praziquantel treatment and re-infection after treatment in a cohort of schoolchildren from rural KwaZulu-Natal/South Africa

Version: 2 Date: 16 September 2004

Reviewer: Lani S Stephenson

Reviewer’s report:

General
This ms. is important and merits publication not only because of the data provided about schisto control via schools but because it demonstrates that simple but major public health/control programs can be integrated into schools with mostly local currently available staff. Comments on specifics below are all Minor Essential Revisions.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

1. Abstract: suggest add to end of last sentence in 1st paragraph: ‘in a cohort of children followed (grade 3).’ (to clarify which children were actually studied)

2. Results, line 1: ‘already’ is awkward; suggest delete or replace with ‘at’.

3. Results, line 3: insert: ‘apparent’ overall cure rate [because non-viable ova were counted as viable ova, therefore the cure rate was only an apparent one and likely to be larger than it seemed]

4. p. 4, line 3: ‘serious chronic disease’ – such as? List at least a few important conditions. There is no mention anywhere in the ms. of why schisto is bad for children, or people, yet the ms. is being submitted to a general biomedical publication with no space constraints! Many potential readers will not know or care much about schisto, and the introduction to this ms. doesn’t help them care.

5. p. 4, 2nd para, line 3: change ‘this group’ to ‘all children in participating schools’ because it is sometimes unclear whether the ms. is discussing all children in the schools vs. just the ones examined for this ms.

6. p. 4, 2nd para, lines 5-6: rearrange to ‘keep infection intensities low in this vulnerable age group’

7. p. 5, line 3: change to ‘school routine to a minimum and because’

8. p. 5, 2nd para, lines 2-3: ‘only children who had been treated with praziquantel were included in the analysis’: what %’s of the total number seen pre-treatment are these?

9. p. 6, Specimen collecting, line 1: insert ‘1998 in the study population only to assess’ to clarify the survey was not done in all children

10. p. 7, line 2: rearrange to: ‘are used only’
11. p. 7, lines 4-9: How many microscopists were there examining the slides? Was any consideration given to quality control or assessment of inter-observer error? This is also where the ms. should first state that egg counts included viable and non-viable ova in the same category.

12. p. 9, ‘considerably underestimates the total prevalence’: would prefer ‘considerably underestimated the total prevalence in this population’ because that may not be equally true for all populations with schisto [or all laboratories].

13. p. 9, ‘For reasons which will be discussed below:’ this is very confusing to the reader. Results are given before how they were arrived at is explained. Better to state in Methods under egg counts that non-viable eggs were also counted and delete the ‘for reasons…’ phrase here.

14. p. 10, line 2: suggest add to end of sentence: ‘and were 12 to 13 years old at the end.’

15. p. 10, Treatment line 2: ‘already’ is awkward English; ‘as soon as’ would sound better.

16. p. 10, Treatment line 4: ‘less than satisfactory’ – that’s for sure. One expects over 90% or even over 95%!

17. p. 11, lines 7-9: ‘an unreliable tool’: this is too strong a statement, even with a reliable and prestigious reference. If the tool is truly unreliable, it’s useless and we cannot advocate its use for medical purposes. If one urine specimen from a group gives a prevalence of 30%, a second taken under similar conditions could increase the prevalence to 35-40 % perhaps, but not 80 or 90, and it couldn’t decrease the prevalence to 10%

In addition, some labs produce better quality data than others….

‘A less than optimal tool’ would be a safer and more accurate statement.

18. p. 12, middle of pg: rearrange to ‘Bulinus globosus snail hosts’

19. Fig 5: there is no mention on the figure of the number of girls or boys in each of the age categories. This makes it difficult to interpret the statements about the age pattern of reinfection in the ms., since some categories [eg, over 15 yr] probably have very small n’s.

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

Level of interest: An article of importance in its field

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

Statistical review: No

Declaration of competing interests:
None