Reviewer's report

Title: Surveillance recommendations based on an exploratory analysis of respiratory syncytial virus reports derived from the European Influenza Surveillance System

Version: 1 Date: 19 June 2006
Reviewer: Bill Carman

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General
The problem with this paper is it is very bitty. All 4 systems are so different, but in multiple ways, be it in terms of sampling policy, sentinel v non-sentinel specimen numbers, methods of analysis, ages of patients, pathogens tested for etc. The authors recognise this. Consequently, it is not scientifically novel/valid and there is no clear message except for "do RSV testing on lots of samples and submit your data centrally because it is interesting and clinically important". All this is a truism, but the data provided do not support the need for surveillance, only for testing more clinical samples in hospitalised persons for RSV which can be a problem in adults, not only small children. This has been known for many years. Anyway, the number of RSV diagnoses made in children in hospital by NPT/IFA is massive, but I wonder whether the data are submitted centrally efficiently. The case they ought to be making is to to set up a wide range of PCR assays across Europe for respiratory illnesses, which are not that expensive marginally for each new pathogen detected, so that we can get a highly productive diagnostic regimen, then to hijack the system for surveillance purposes. I agree that we ought to be doing a lot more surveillance at hospitals (something I have argued for for many years) for RSV and all other respiratory viruses but I think it a strategic error (actually slowing down the introduction of complete surveillance) to introduce this piecemeal, virus by virus. What would be next after the 3 years it takes to introduce RSV Europe-wide? Metapneumovirus? Or coronavirus NL63? I think their message should be an opinion piece rather than a scientific paper.

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

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

Discretionary Revisions (which the author can choose to ignore)

What next?: Reject because too small an advance to publish

Level of interest: An article of limited interest

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

acceptance of this paper might lead to more money coming our way for doing surveillance!! But probably not