Reviewer's report

Title: A non-randomised, single-centre comparison of induction chemotherapy followed by radiochemotherapy versus concomitant chemotherapy with hyperfractionated radio-therapy in inoperable head and neck carcinomas

Version: 1  Date: 15 August 2005

Reviewer: Branislav Jeremic

Reviewer's report:

- Major Compulsory Revisions

1. Page 10, predictors of outcome - must include predictors of overall survival
2. Discussion must include more emphasis on adverse effects of induction chemotherapy such as accelerated repopulation of surviving clonogens, increased toxicity, treatment interruptions - all leading to poorer local control
3. On page 12 - theoretical aspects of administration of induction chemotherapy must be placed into the context of clinical studies observing neither significant downstaging nor substantial impact on the distant metastasis rate (due to small incidence of distant metastasis even in stages III/IV [M0] SCC H&N)
4. Conclusion - must be softened since this is only a retrospective study

- Minor Essential Revisions

1. In Summary, on page 2 - p values for multiple comparisons should be provided.
2. Word "overlapping" is rather unusual in the English literature for concurrent administration of these two modalities; it should be replaced with a more appropriate wording (consistently throughout the text).
3. On page 5, treatment records - dose of 40 Gy is not the tolerance dose for the spinal cord using standard fractionation. This must be rephrased.
4. Page 6, end of para 1 - fractionation should have been specified when providing dose range for various lymph node areas in concern here
5. Results, end of page 6 - median follow up for all patients shoudl have been provided.
6. Patients' characteristics, page 7, para 1 - p values should have been provided for comparisons
7. Stages should be revisited
8. On page 8, para 2 - percentage of patients experiencing treatment interruptions should have also been accompanied with p value

- Discretionary Revisions

1. Authors should consistently use only one term for concurrent/simultaneous radiochemotherapy
2. Acute toxicity should have been mentioned in the Abstract
3. On page 3, instead of the reference of Fu et al, it would be better to provide the data from a number of original studies in thsi field
4. On page 5, in treatment records, sentence on the dose reduction of chemo during RT should be rephrased to better conform the (presumed) meaning

What next?: Accept after minor essential revisions
**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:** No

**Declaration of competing interests:**

I declare that I have no competing interests