Reviewer’s report

Title: Real time contrast enhanced ultrasonography in detection of liver metastases from gastrointestinal cancer.

Version: 1 Date: 26 March 2007

Reviewer: chris J harvey

Reviewer’s report:

General
The use of english language needs to be revised throughout the paper.
Several sections of the text are underlined. Why is this?

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
1. Were the 120 patients consecutive?
2. Was the study prospectively carried out?
3. Why were 2 US systems used? Was the microbubble imaging software identical?
4. What criteria were used to identify metastases on CEUS mode?
5. How long was the CEUS imaging performed.
6. Were any repeat injections of Sonovue used?
7. Was the segmental distribution of metastases noted on all 3 modes.
8. Were blinded reads performed? This would strengthen the paper. If not this should be included as a limitation.
9. Were the US readers blinded to the CT data?
10. Two CT scanners were used -this is a limitation. What CT protocols were used.
11. Were other benign lesions detected during the study.
12. What was the mean size or smallest size of the lesions detected on US, CEUS and CT. Was the difference significant?
13. Were there any technical failures using CEUS?
14. How many of the livers were fatty which limits depth of penetration.
15. The aim of the study should be stated at the end of introduction not the study results.
16. When there were discrepancies between the different modes i.e more lesions seen on CEUS compared to CT, what other techniques were employed to resolve the differences such as MR, intraoperative US, biopsy or resection. This data could be incorporated into table 2.
17 The last part of the legend for Table 2 is missing.
18 What reasons are there for the mets seen on CT but not CEUS. Were the lesions in US blind spots such as under the hemidiaphragm or obese patients?
19. The US and CEUS characteristics of the metastases have not been stated. How may were echogenic, isoechoic, hypoechoic. What were the arterial characteristics on CEUS?
20 How many mets were biopsied confirmed?
21 The paper would benefit from more figures.

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?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published
Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:
I declare that I have no competing interests