Reviewer’s report

Title: Cardiac damage after treatment of childhood cancer: A long-term follow-up

Version: 1 Date: 11 November 2007

Reviewer: Guido Pastore

Reviewer’s report:

General
The AA report on cardiac late effects observed in a cohort of survivors after childhood cancer. The topics was focus on by other groups of investigators, however the AA analyzed their data using an interesting statistical tool (tree analysis).

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

1. Abstract Results patients treated latest ...are at highest risk. please discuss why? they received larger doses of anthracylene or RT? in late '80 the cardiotoxicity of Antracycline was well know, even if the safety dose was higher (300mg/sqm)than that now we accept (less than 200mg/sqm)

2. Time period emerged as a risk factor, please discuss

3. Female gender is a predictor of cadiotoxicity, the AA do confirm this observation,why?

4. Among the 874 survivors, 399 were regularly followed and 211 had complete cardiac evaluation. Please describe the principal clinical characteristic of the 3 groups (874, 399 and 211). Is it possible that the 211 survivors had a selection bias (more HD, less female, more younger patients with shorter follow-u...). Is it possible that the patients included in the study were biased?

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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. add number of pages

2. Abstract, second paragraph METHODS: Included in the study we (delete bold)

3. pag. 14, at the end of the first paragraph (...) what means?

4. pag. 14 last paragraph, 6th lines from bottom class 1(?NYHA), please delete (?

4. table 1. the low level of antracycline is <200mg (including this dose) or is up to 200mg (excluding 200) as in table 3 and in figure 3?

5. table 3. there are some words non translate in English: antraciklini, 1968 do
1978
6. ref 16 change in pediatr hematol oncol
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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 whose findings are important to those with closely related research interests

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

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

I declare that I have no competing interests