Reviewer’s report

Title: A Systematic Review of the Psychometric Properties of Quality of Life measures for primary school aged children with Cerebral Palsy

Version: 4 Date: 22 April 2010

Reviewer: Susan Ishoy Michelsen

Reviewer’s report:

This is an important and useful review. There is a need for evaluation of quality of life measures in children with cerebral palsy. The paper is clear and well written and includes relevant discussions regarding for example definition of quality of life, how to evaluate construct validity, evidence of re-test reliability and age range of the instruments.

Minor essential revision

1. Page 3, line 5-7q

If comparison with children in the general population should be mentioned in the paper it would be beneficial with a conclusion based on more studies. For example a European study of children with cerebral palsy found no differences in self-reported quality of life quality compared with children in the general populations (Dickinson HO et al. Self-reported quality of life of 8-12-year-old children with cerebral palsy: a cross-sectional European study. Lancet 2007).

2. Page 6, line 10-15

It would be helpful and informative with a more precise description of how the CanChild rating form was modified (besides excluding the section using the ICF framework) and the 12 (11?) items were selected. For example “clinically utility” is described to be measured by “ease of interpretation, feasibility and how acceptable the measure was to assessors and respondents”, however it seems that only “clearity of instruction” has been assessed? Does this mean that whether the questionnaire is designed to self-completion (mentioned in Table 4) or price of instrument is not included in the evaluation of the instruments?

3. Page 6, line 12-15 and Table 3

Items used for rating are clearly shown in Appendix A (except that it includes 11 and not 12 items?). It would be helpful to be able to recognise these items in the text and in the tables. Table 3 and 4 interestingly shows reliability, validity and clinical utility. It would be informative to include responsiveness, standardization and scale construction as well.

In conclusion:

1. The question posed is well defined and relevant
2. The method is well described and appropriate
3. Discussion and conclusion are relevant and supported by the data
4. Limitations of the work are clearly stated
5. Title and abstract reflects the findings
6. The paper is well written

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**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'