Reviewer's report

Title: The Expert Network and Electronic Portal for children with respiratory and allergic symptoms: rationale and design.

Version: 2 Date: 26 September 2012

Reviewer: Anders Bjerg

Reviewer's report:

This was a descriptive correspondance paper regarding a framework for the identification and management of (mainly) atopic diseases and asthma in children in The Netherlands, consisting of a network of healthcare experts (EN) and a web-based IT structure, the EP. Little results are available so the paper instead outlines the study design and its progress to date.

The paper is well structured with a clear aim and contents in a logical order. It is well written and the introduction and discussion sections are adequate. The topic of facilitating disease management while also increasing the access to data for scientific exploration is highly relevant. I have only one issue and a few minor suggestions, below.

Major compulsory revision:

As of now, it is not clear why there are discrepancies between the numbers given under "Findings" and those detailed in Discussion, 2nd paragraph. I suggest that all results/findings are collected in one place, and discussed subsequently. E.g. in "Findings" is stated that "915 children have been invited to participate", yet the Discussion reads "since the start of inclusion (...) 1485 patients were invited to participate". Since this is the only original data presented in the paper it needs to be crystal clear.

Minor essential revisions:

Background, paragraph 1, 2nd last sentence: "are common approaches to mitigate/avoid" would be a more precise wording. Control usually refers to medications.

Methods, study design, line 7: "potential toxins"

Methods, The Expert Network: Sentences 1 and 2 seem to overlap, please revise.

Methods, The Expert Network, para 3: Parents of patients who do not understand Dutch: a) at what age do the participants complete the data themselves, and b) commonly, e.g. for 2nd generation immigrants the children may have better language skills than their parents. Could this be taken into consideration, leading to less loss of non-Dutch speaking patients?

Methods, Diagnostic tests, Respiratory function, 1st line: "..asthma, lung function
and allergy tests"

Methods, Diagnostic tests, Respiratory function line 4: "three correctly"

Methods, Follow up, line 1: "each season", does this mean that patients are followed up at even 3-month intervals? And how about exacerbations/other unexpected events? The structure of follow-up could be clearer in the paper.

Methods, Follow up, last sentence: If medication use is registered exclusively by the patients large discrepancies may exist from how much medication the patients actually take.

Discussion, para 3, line 3: "treatment related asthma phenotypes": I am well familiar with the discussion of phenotypes, but not with any treatment-related phenotypes. Please either explain this, or omit from the paper.

Figure 2, "Patient inclusion" not patiënt

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests