Reviewer's report

Title: Behavioural Sequelae Following Acute Kawasaki Disease

Version: Date: 18 January 2005

Reviewer: Herve Allain

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General
The authors aim at measuring a number of behavioural and social parameters within a cohort of Kawasaki disease (KD) patients knowing that after the acute phase neurological and psychological complications have been noted; this can continue for months or years.

The question posed by the authors is new and well defined. Few studies if none examined in a systematic and controlled manner this chapter of Paediatrics.

The methods used are appropriate and well described, authorizing a replication of the work. It is based on a retrospective cohort of children who were hospitalized in one center from 1995 to 2001 for the diagnosis of Kawasaki disease (good definition of the criteria); Parents were contacted by phone according to the usual ethical rules and approval by the local ethics committee. Questionnaires (112) were sent out to parents: 77 were received and 65 were suitable for inclusion. Two type of controls were used: children hospitalized for a short period of time and siblings, noting the low level of returned questionnaires. Data collection instruments are clearly decribed and already published. Statistical analysis is correct.

The data are sound and well controlled; of course the number of drop-outs is very important but this point is discussed in the interpretation of the results and contributes to the decrease the power of this study. KD group showed elevated internalizing scores in the clinical or borderline range, as well as greater overall total difficulties and thought problems. Such results are important for the management of the children when they grow-up and for the information to be adressed to families.

The discussion and conclusions are well balanced; it is a good idea to include the pathology opinion and the PET-Scan preliminary data in the discussion. For the PET Scan, the authors should mention the marker they used: glucose? other??

Title and abstract convey what has been observed.

The writing is excellent.

In conclusion this manuscript can be accepted after discretonary revisions: Pet Scan (marker?); Fig1 (is it not a table? in 5: correct LymphadEnopathy) It is an article of importance in the field which should lead to some other studies; it is essential to publish dat in the case of rare diseases. English is good, and no need for the help of a statistician, Knowing the results are very descriptive. I declare I have no competing interests.

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

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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)

Discretionary Revisions (which the author can choose to ignore)