Reviewer's report

Title: Further investigation of confirmed urinary tract infection (UTI) in children under five years: a systematic review

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Reviewer: Jim Beattie

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REVUE FOR BMC PEDIATRICS

FURTHER INVESTIGATION OF CONFIRMED URINARY TRACT INFECTION (UTI) IN CHILDREN UNDER FIVE YEARS: A SYSTEMATIC REVIEW

Westwood M E et al

The authors present a systematic review on the most effective approach to the further investigation of UTI in children under five years of age, the main outcome measures being reduction in further UTI or renal parenchymal scarring.

This subject has generated a vast volume of literature over many years with an emphasis on diagnostic accuracy studies but as the authors point out, limited consideration of the impact of investigation on clinical outcome. The review concentrates on relatively recent data particularly that published beyond 1999. I have some comments for the authors:

1. In the introductory section the authors comment on the risk of end stage renal failure with a recent reference, but it would be helpful for readers not familiar with this topic to give some estimate of the risk of long term complications like renal insufficiency and hypertension (1,2) since our understanding of long term risk is changing. (Minor essential revision).

2. The authors tend to use the term "reflux" in the text but I feel the term vesico-ureteric reflux and/or the abbreviation, VUR is more appropriate (Minor essential revision).

3. The authors refer to reference (93) as a systematic review but my understanding of this study was it was a long term prospective multicentre trial of medical versus surgical therapy of severe VUR and not a systemic review (Minor essential revision).

4. In the light of two recent reports (3,4) of the impact of prenatal ultrasound on postnatal investigation following UTI, it would improve the background and/or discussion sections of the paper if this issue was discussed (Discretionary revision).

5. Some revision of the tables is necessary. I presume Table 1 is figure 5 and Table 2 is figure 6 but the authors refer to "additional Table 1" which is missing (Major compulsory revision).

References


2. Wennerstrom M et.al. Ambulatory blood pressure 16 â€“ 26 years after the first UTI in childhood.
J. Hypertension 200;18:485-491
