Reviewer's report

Title: Childhood deaths from external causes in Estonia, 2001-2005

Version: 1 Date: 2 April 2007

Reviewer: Anders Eriksson

Reviewer's report:

General
This is an interesting and well written paper on a subject of great importance. I think this paper should be published, but I suggest that the authors consider the following comments.

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

Regarding the classification of intent (page 6 and Discussion), please clarify who made this classification, and on what basis. Autopsy findings are often of limited value in the classification of intent, but the circumstances – as reported by the police, or as presented in a verdict from a court of law – are crucial. For these reasons, intent can in many cases not be classified from autopsy findings alone.

I strongly doubt that the statement “Aspiration was the most frequent cause of asphyxia…” (page 8, Discussion, Table 1) is correct. Aspiration is in most cases the result of post-mortem regurgitation, and is thus of no importance as a cause of death. But if aspiration in some cases should represent the "true" terminal cause of death, we anyway here discuss the "underlying" cause of death, i.e. in these cases the cause of the aspiration (e.g., intoxication, brain processes etc).

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

The paper would benefit from a linguistic revision. E.g., “forensic diagnosis” (page 6) should probably read “cause of death” (?), “cadaver” (page 7) should read “the dead body” etc. Furthermore, there may be some confusion regarding the terminology of asphyxial deaths (page 8), since strangulation and hanging are used as if they represented the same mechanism, which is not the case. “Suffocation from pillow” should probably read “smothering” (or “obstruction of external airways”), “lethal compression” should probably read “thoracic immobilization”, “forensic autopsy” > “medico-legal autopsy”, “forensic doctor” and “forensic medical expertise” and “forensic expert” > “forensic pathologist”, “other injuries” (Tab 1) > “other external causes of death”, “intent unknown” (Tab 1) > “undetermined manner of death”, etc.

Please clarify whether the cases of undetermined cause of death (page 9) were excluded from the investigation. If COD was not established, also manner of death is not established, and consequently these cases cannot be included as unnatural deaths.

Please clarify what is meant by “…allows generalization to a national level…” (last page) – since this report does indeed cover the whole nation!?

Please provide correct spelling of authors’ names as presented in the original publications, e.g., Nordic letters (åäö) should be used wherever appropriate (Björnstig etc)

Discretionary Revisions (which the author can choose to ignore)

I think that a paragraph on “Preventive measures” would be appropriate, since this is the final aim of the investigation.

Please check pagination of Discussion and further.
Please provide English translations of non-English titles in the list of references.

What next?: Accept after minor essential revisions

Level of interest: An article of importance in its field

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

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

Declaration of competing interests:

In 2003, I participated in a quality assurance program of Estonian forensic medicine (financed by my home country Sweden), and I then met with, and worked a few days together with, two of the authors. I have no competing interests because of this, and in no other aspect.