Reviewer's report

Title: 50 years experience with Dupuytren’s contracture in the Erlangen University Hospital - A retrospective analysis of 2919 operated hands from 1956 to 2006

Version: 1 Date: 14 September 2006

Reviewer: Vilh Finsen

Reviewer's report:

General
This is a valuable contribution to the literature on Dupuytren’s disease (DD), but will need very extensive re-working and shortening before it can be published.

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

1. The language is poor. In many places one has to guess what is meant. The paper should be re-written by a natural English speaker before it is re-submitted.

2. The consensus is not that DD is 5.5 times more common in manual workers.

3. The classification of degree of affection should be explained more thoroughly. Iselin’s classification only tells one which joints are affected, not to which degree. Tubiana’s classification, as I know it, increases in increments of 45 degrees total contracture of the digit. Is this what is used in this paper to describe the state of the hand? Why the difference in describing fingers and hands? Furthermore, it is confusing to mix up stages (which are used in the classifications) and degrees which are used in this paper. Are they the same thing?

4. Why give the incidence of nerve injury for two time periods? Presumably this is because the treatment with the extending digital device was introduced at this time. This should be made clearer in the paper. But of what are 3 patients with nerve injury between 2003 and 2006 0.01%? It can’t possibly be of the patients operated during this period, nor can it be of the total number of patients operated during 50 years as the next paragraph tells us that 4 patients with tendon injury represent 0.16%. (It says 5 patients with tendon injury in the table).

5. Most of the reporting on the stage of affection in the fingers in various sub-groups and the discussion of it should be omitted. Figure 3 can be retained as it gives an idea of the indications for surgery, but discussion of the stage in various subgroups is mainly meaningless. For instance, all that can be read into the significantly higher stage of affection in epileptics is that they are less likely to be operated at an earlier stage (for socioeconomic reasons?), not that their disease is more aggressive. That the stage was the same in women and men only shows that the surgeons were consistent in their indications for surgery.

6. The information on patient mean age does not appear in the results section and in any case looks suspect from figure 1.

7. Recurrence rates are briefly discussed, but I can not find them reported in the results section. A full report of recurrences, at least those that lead to re-operation, should be included in the paper.

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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)

1. It seems strange that no more recent reference than one from 1963 can be found for the genetics of DD.

2. Percentages should be given without, or at most with one, decimal.
3. It is very unusual that more index fingers were affected than thumbs. If this is really the case, it should be discussed.

4. The discussion is too long in that it includes too much information (e.g. conservative treatment) that has not been studied in the investigation itself.

5. Figures of bar-charts should be two-dimensional, not three-dimensional. The last dimension only makes them harder to read.

Discretionary Revisions (which the author can choose to ignore)

**Which journal?**: Not appropriate for BMC Medicine: an article whose findings are important to those with closely related interests and more suited to BMC Clinical Pathology

**What next?**: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

**Quality of written English**: Not suitable for publication unless extensively edited

**Statistical review**: No

**Declaration of competing interests**:

I declare that I have no competing interests