Reviewer's report

Title: 2-octyl cyanoacrylate versus reintervention for closure of urethrocutaneous fistulae after urethroplasty for hypospadias: a randomized controlled trial.

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Reviewer: M. S. Ansari

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The authors present their experience with 2-Octyl cyanoacrylate in cases of urethrocutaneous fistula. The product has been used previously and has shown results in small sized fistula. OCA has the advantages like its application on outpatient basis with minimal anesthesia besides its multiple applications.

I wonder the overall fistula rate in the arms is too high i.e. 40% and 32% in OCA and control arm. While, the reported fistula rate in < 5 mm is much less [ref# 7, 25, 26] if done a carefully with a 3 layer closure. Similar data with high incidence of failure have been shown by other authors over last one decade. Apparently this may be less expensive the overall surgical cost but the multiple hospital visits and parental anxiety cannot be undermined with every recurrence of fistula. Many other authors have applied OAC after anatomical closure of fistula and reported much better results.

Level of interest: An article of limited interest

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:

None