Reviewer's report

Title: Sexual assault in Lagos, Nigeria: a five year retrospective review.

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Reviewer: Heidi Resnick

Reviewer's report:

The manuscript addresses the important topic of rape or other sexual assault, prevalence of reported cases seeking services specific to rape or other sexual assault among a hospital population and descriptive characteristics.

On page 2, data are plural so this should be phrased data "were" analyzed and --similarly if this occurs elsewhere should be similarly phrased On page 3, the definition of rape or suspected includes penetrative assaults ---much of what the authors have in their description of the legal definition is correct but then they go beyond that to include other types of sexual assault (e.g., touching of breasts and being made to touch another's genitals)--the latter are sexual assault and in isolation would not constitute rape --so this should be revised.

It would help if the authors are very clear about the prevalence being only those reporting to the hospital with a sexual assault or suspected sexual assault if that is the case and this needs to be made clearer. Is there a sexual assault program? At what point is it determined that a woman has been recently sexually assaulted?

Do women need to self-identify and self present or is this determined at regular obstetric/gynecology visits and if so ---the consistency of such screening will introduce error

Of course with either self identification or screening of routine gynecology patients this is likely a vast underestimate of actual cases.

The program and how it works should be described.

How do the authors know that no forensic evidence is obtained.

Could the authors describe if there is a protocol in place for what the treatment or evidence gathering procedures are supposed to be?

Rather than surmising that some tests or procedures might not be done (e.g. HIV prophylaxis, pregnancy related) due to age or time elapsed --can the authors control for those factors and then also report on the percentages of those who would be eligible who received the services ---so for example--controlling for time in which HIV prophylaxis might be recommended ---or controlling for pubertal when looking at percent receiving pregnancy prophylaxis?

This might be useful.
There are some places that additional citations might be useful --but generally the report is well written.