Reviewer's report

Title: Audit of therapeutic interventions in inpatient children using two scores: are they evidence-based in developing countries?

Version: 1 Date: 8 October 2004

Reviewer: Robert Phillips

Reviewer's report:

General

This is paper reporting a new slant on a previously queried topic: how evidence-based are interventions in children in the hospital setting? The novelty arises from the authors location in the developing world; previous reports have all arisen from 'developed' countries. It is a very interesting read and I have enjoyed reviewing it.

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

M1. A more detailed description on the search for evidence should be provided. Was it a single individual? Were the searches verified? What was the interrater reliability?
M2. The paper is described as an audit, and seems to complete the first half on an audit cyle. How is this 'audit' to be completed? If it is not, then an alternative descriptor should be chosen.
M3. The authors use evidence taken largely from the 'developed' world, and make no reference to the translation of evidence between different populations. For example, where antibiotics are probably an inappropriate action for earache in the UK. in an area with high levels of mastoiditis such an intervention may be clinically justified. These factors do not seem to have been addressed in this manuscript, and I believe are essential in discussing evidenc based care.

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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)

m1. The Oxford Levels of Evidence and Grades of Recommendation have been slightly mis-used here. The paper needs to state the grade of recommendation (A-D) and if the authors wish, to provide the level of evidence (1a-5). I would suggest this is done by enclosing the Level of evidence in (brackets).

m2. A description of how the the month chosen (January) may have affected the results would be interesting.
m3. There are a number of speeling mistakes and gramatical errors. These are insufficient to make the paper unreadable or incomprehensible.

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Discretionary Revisions (which the author can choose to ignore)

D1. I found table 6 - the difference between the prescribed level of evidence and appropriate intervention - a very important point for future action in this hospital. The authors could chose to highlight how they wil use this type of information to improve the care of children.
What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article whose findings are important to those with closely related research interests

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

Statistical review: No

Declaration of competing interests:

I am one of the authors of the Oxford Levels of Evidence used in this study and a Paediatrician with an interest in promoting the update of the best evidence based care for children.