Reviewer's report

Title: The Prenatal Ultrasonographic Detection of Myelomeningocele in Patients Referring to Children's Hospital Medical Center

Version: 1 Date: 3 April 2006

Reviewer: Awi Wiesel

Reviewer's report:

General

Well researched and described. Conclusions like better training and equipment as well as extending the deadline for termination are fine. Just the main conclusion (TOP) and the thinking about folic acid are very questionable.

Major Compulsory Revisions

1. If prenatal detection rate and a possible termination are the points of interest the location of the defect is of minor importance, but the time of diagnosis is in the centre of interest. Therefore, table one is merely nice in terms of description but of no interest to the study question. Site of the lesion, if mentioned, is important to assure comparability to other data sources (international) and a table would be appropriate. A p-value in this issue does not lead us to any conclusion, especially if we do not know which numbers are compared to each other (just a description would be sufficient).

2. On the time scale (week of diagnosis) a p-value may be more useful.

3. It would be helpful to know if these are isolated MMC’s or if they are in association with syndroms or other multiple congenital anomalies (these are included in most other studies and mainly easier diagnosed prenatally and thus a selection could take place concerning the study question).

4. If the prevalence of MMC is really so high in Iran (the Ketabchi publication is out of reach for us) there should be at least a hypothesis why (MTHFR-mutation?). Otherwise a folic acid supplementation would be even more worthwhile.

5. To quote Boyd et al (2000) Introduction: "The detection of serious fetal abnormalities by ultrasound screening allows parents to prepare for the birth of a handicapped child or to consider termination of the pregnancy." In my opinion this is the way the issue of terminations should be addressed. Using modern techniques to improve human health implies adopting human ethical rules as well.

Minor Essential Revisions

1. With a n=140 all percentages must be given as whole numbers only.

Discretionary Revisions (which the author can choose to ignore)

non

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

Level of interest: An article of importance in its field
Quality of written English: Needs some language corrections before being published

Statistical review: Yes, and I have assessed the statistics in my report.