Reviewer’s report

Title: Treatment of Acute Diverticulitis Laparoscopic Lavage vs. Resection (DILALA) A Randomised Trial

Version: 3 Date: 13 June 2011

Reviewer: lawrence friedman

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I have reviewed this manuscript.

Overall, it is well written and although brief, contains most of the key material.

I have a few questions/clarifications:

a) Because this study is not blinded, how do the investigators insure that the identity of the last assignment (or possibly several assignments) to treatment are unknown to the person performing the surgical or lavage procedure? It is stated that blocking is in groups of 10, which, since it is known to all and unblinded, at least the assignment of the last in a group of 10 and possibly as many as the last 5, will be known. This can subtly alter decisions as to eligibility for randomization.

b) Again because the trial is not blinded, how do the investigators ensure objective outcome assessment?

c) During surgery, which is after randomization, a diagnosis other than diverticulitis is made, the patient will be excluded. Does this mean that analysis will not be by intention-to-treat? If not, what sort of analysis will be done? How will those excluded be handled in the analysis? About how many are expected to be excluded?

d) A few minor wording suggestions: Abstract, line 2: “fewer” rather than “less”; page 5, line 2: suggest “Patients are considered for inclusion when ...”; page 5, line 8: “temperature” rather than “tempered”; page 5, line 16: “... verify a pathogenesis other than ...”; page 5, line 13 from bottom: “HEALTH ECONOMICS ASSESSMENT” rather than “HEALTH ECONOMY ASSESSMENT”