Reviewer's report

Title:Corticosteroid Treatment for Community-acquired Pneumonia: A Randomized, Double-blind Study - the STEP Trial

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Reviewer:Djillali Annane

Reviewer's report:

This manuscript is well written and reports adequately the methodological details of a large multicentre randomized trials assessing the benefit to risk of a 7-day treatment with prednisone in patients with CAP and admitted to the hospital. I have only few minor comments/questions

Major compulsory revisions
None

Discretionary Revisions

1- how the researchers will deal with viral pneumonia? The trial started in 2009, during the H1N1 pandemics. In 2010 and thereafter H1N1 influenza accounted for relatively many community acquired pneumonia. This might be an important confounder.

2- it is worth explaining why the researchers didn’t chose to start with IV corticosteroids, given that all patients had to be admitted to the hospital. Even though, the treatment could be continued orally thereafter.

3- There is a worldwide shortage in synthetic corticotropin. Did the researchers secure the provision of ACTH for testing the research participants?

4- At least one previous meta-analysis suggested that the more severe the CAP the more likely the benefit from corticosteroids. In particular patients with shock or ARDS may be those who will benefit at most. Why not including exploration of treatment effects in these subgroups?

Level of interest:An article of outstanding merit and interest in its field

Quality of written English:Acceptable

Statistical review:Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

I have no financial conflict of interest to disclose
I am currently coordinating a large multicentre trial of hydrocortisone plus fludrocortisone for septic shock.