Reviewer's report

Title: Surgical complications in neuromuscular scoliosis operated with posterior-only approach using pedicle screw fixation.

Version: 2 Date: 13 January 2009

Reviewer: Alvin Crawford

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Major Compulsory Revisions

Page 2, results: How are the complications divided between major and minor complications? They have mentioned pulmonary edema and effusion as major complications while atelectasis and pneumonia are listed as minor complications.

While both are equally serious conditions especially pulmonary edema and pneumonia.

Page 5, line no. 15: The objective of the paper was to......I think it should be “the objective of this study is to”

Page 9 last sentence: It seems like that authors are trying to compare between patients with pelvic obliquity > 15 degrees and patients who did not have pelvic fixation....it is not clear...needs more explanation.

Page 10, line no 7: authors have mentioned 20 and 19 patients with one major and one minor complications respectively....This does not correspond with the abstract in which they have mentioned 21 and 20 respectively....

Page 10, third paragraph: authors have mentioned that complications requiring chest tube insertion are classified as majors....but they have mentioned pulmonary edema as major complication and it does not need chest tube insertion.

Page 11: line no 10: compression of screw in the cord.......This sentence does not make sense.....

Page 11, line 17: two patients had ileus.....Ileus can significantly delay recovery and according to author’s criteria it should come under Major complications....but they have mentioned under minor complications.

Page 12: out of three patients who had bed sore, two of them have gluteal bed sore and one only is related to the pressure area over the screw....so can we consider gluteal bed sore as complication of surgery or because of neglected care of the patients??

Page 15: 1st paragraph: authors have mentioned that the thoracoplasty was for
better correction while earlier in the paper they mentioned that it is for cosmesis. And they have not mentioned whether they noticed any air leak during surgery and why the chest tube was not inserted during the surgery?

Page 17: one patient with poliomyelities developed deep wound infection probably due to extensive dissection and severe curve…..strange statement? No scientific proof…

Page 19: coccygodynia because of vertical alignment of the coccyx: strange statement…if sagital balance was restored to normal why there should be abnormal alignment of the coccyx post operatively?

The article still needs some explanations …..

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, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

'I declare that I have no competing interests'