Reviewer’s report

Title: A Systematic Review of Pediatric versus Adult Patients in Current Pectus Excavatum Treatments

Version: 1 Date: 10 September 2013

Reviewer: A Protopapas

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Major Compulsory Revisions
-the follow up needs to be completed after the removal of bars, otherwise the patients with incomplete procedures (e.g. Nuss bars in situ) should be excluded from the data
-the comparison of outcomes needs to be by p values
-the timing of pectus repair is a complex decision that needs to be discussed at depth should the conclusions include guidance on optimum age for MIRPE etc.
-Any non randomised non prospective comparison of interventions is by definition unrobust, and clinical conclusions on choice of technique is speculative at best
-I have not done a Ravitch for a couple of years, yet I find difficult to understand the concept of bar displacement in Ravitch.
-Similarly, the 8% pneumothorax incidence in Nuss is possibly underdiagnosis, especially where endoscopic capnothoraces are utilised. The esteemed authors need to define the recording of pneumothorax in a robust fashion: clinical, radiological etc.

Overall the esteemed authors need to rethink the manuscript and the message. The pigeon holing of three names masks a whole spectrum of operations that need to be discussed in detail. Any speculation has to be removed and only data supported by robust metanalytic stats should be included.

Many thanks

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

Quality of written English: Acceptable

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

Declaration of competing interests:

'I declare that I have no competing interests'