Reviewer's report

Title: Parenteral lidocaine for treatment of intractable renal colic: a case series

Version: 5 Date: 17 September 2010

Reviewer: Gary McCleane

Which of the following best describes what type of case report this is?: Unreported or unusual side effects or adverse interactions involving medications

Has the case been reported coherently?: Yes

Is the case report authentic?: Yes

Is the case report ethical?: Yes

Is there any missing information that you think must be added before publication?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: Yes

Does the case report have explanatory value?: No

Does the case report have diagnostic value?: No

Will the case report make a difference to clinical practice?: Yes

Is the anonymity of the patient protected?: Yes

Comments to authors:

Intro: remove "a"

Case presentation: first line: may be better to say "because of inconsistent response to standard therapy with opioids and NSAIDs"

Introduction: first line needs rewritten

Intro, 2nd line change "is used" to "are used"

Case description: please clarify whether these patients had failed already to respond to opioids and NSAIDs. Is ultrasonography the best way of confirming the presence of a renal stone or is an x-ray necessary?

Acknowledgements: I appreciate how helpful the authors Assistant Professor has been, but may I respectfully suggest that their acknowledgement is a little
"over the top"?

References: there are none to back up the contention that IV lidocaine can relieve conditions such as neuropathic and postoperative pain. Addition of these references would be helpful.

I do accept that a useful pain relieving effect with IV lidocaine has been demonstrated in these patients. However, one of the merits of IV lidocaine is that its effect may be prolonged, even after a single blous administration. Patients may get hours, days or weeks of relief. Since the patients described had renal colic, presumably caused by a renal stone, under normal circumstances the colic will return when the analgesia has worn off until such times as the stone is passed or removed. Therefore, the report would have much more impact if pain scores were recorded over a much longer time. The question therefore remains of whether the impressive analgesia shown over a 30 minute period is extended beyond that period. If it is, then this is a useful treatment, if not then it is an interesting observation of little clinical relevance.

**Quality of written English:** Needs some language corrections before being published

**Declaration of competing interests:**

I declare that I have no competing interests.