Reviewer’s report

Title: Management of intra-abdominal hypertension and abdominal compartment syndrome: a review

Version: 1 Date: 23 August 2013

Reviewer: Ana Carlotti

Reviewer’s report:

The topic is relevant and knowledge about intra-abdominal hypertension (IAH) and abdominal compartment syndrome (ACS) is limited worldwide among health care workers. However, some issues must be addressed to improve the paper:

There are many repeated statements in introduction and results. This should be avoided. Please, review it.

In the definition of ACS, the authors should state that although the cut off of 20 mm Hg along with a new organ dysfunction has been used to diagnose ACS, it can occur with values of intra-abdominal pressure (IAP) below 20 mm Hg. The development of organ dysfunction and failure associated with the elevation in IAP is of greater importance to define ACS than the absolute IAP value (Intensive Care Med 2006; 32:1722-1732).

In Results: "Etiology of intra-abdominal pressure" should be changed to "Etiology of intra-abdominal hypertension". In the same section and in Table 1, items #2 and 3 (increase in luminal contents and abdominal collection of fluid, air or blood) should be grouped as one.

Minor:

Repeated words and phrases throughout the paper need revision.

Level of interest: An article of importance in its field

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 do not have any conflicts of interest regarding the revision of this manuscript.