Reviewer's report

Title: A randomized controlled trial: Can acupuncture reduce drug requirement during propofol sedation for colonoscopy? A study protocol

Version: 1 Date: 15 October 2015

Reviewer: Wolfgang Raith

Reviewer's report:

Thank you for the opportunity to review this manuscript.

In endoscopic procedures, propofol can be safely administered either alone or in combination with fentanyl. Propofol is safe and effective for sedation during colonoscopy for generally healthy individuals and can lead to faster recovery and discharge times, without an increase in side-effects and increased patient satisfaction (Wang D PlosOne 2013, Cochrane Database Syst Rev. 2008)

The Trieger Test (by Norman Trieger) is a very simple “connect-the-dots test” that has been scientifically validated and has been used in hundreds of sedation and anesthesia research articles since 1970. The reliability and validity of the Trieger tests in anaesthesia is well known and established.

The manuscript is well-written and the idea to investigate acupuncture, placebo and sham acupuncture is great. In patients with chronic pain, both acupuncture and sham acupuncture appear to have much greater efficacy than when patients are left untreated. Furthermore, patients’ and endoscopists’ satisfaction with the entire procedure is defined as secondary endpoint- which is important.

I have only a few suggestions:

Major Compulsory Revisions

1) The title is named: “Can acupuncture reduce drug requirement during propofol sedation for colonoscopy?” but then the authors state that the medication is a combination of propofol and and fentanyl. So I think this should be stated clearer in the title.

Minor Essential Revisions

2) Furthermore the authors hypothesize that “true” acupuncture causes a “sedative” effect Compared to the other groups. As acupuncture points they named P6, ST36, LI4.

Large intestine (LI4) is one of the well know acupuncture points BUT ! Stimulation of the LI4 has been demonstrated to produce an analgesic effect in both animal studies and human clinical trials. The National Institutes of Health has approved this method as a 91 useful complementary adjunct in the treatment of post-operative dental pain (NIH Consensus Conference. JAMA. 1998) and now the primary outcome parameter is „sedation“. So i think there should be a clearer statement about LI4.
Major Compulsory Revisions

3) Statistic: well written and sounds logic. If I may, I would like to make the suggestion to use a non-inferior statistical approach?!

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 declare that I have no competing interests’