Reviewer’s report

Title: Outcome Of Surgical Repair Of Pectus Excavatum in Adults

Version: 0 Date: 16 Apr 2017

Reviewer: RE Kelly

Reviewer's report:

A solid report of a good clinical experience. Several questions:

Rhythm disturbance of 24% preop, with resolution in all but 2%, needs to be in the literature. Was the postoperative resolution of atrial fib and supraventricular tachycardia documented by EKG? What was the age distribution of the arrhythmia patients?

Why did you choose to divide the age categories as you did (15-25 y.o., and >25 y.o.)?

What is the advantage of the multiple categories of Haller index? Why not just >3.2 vs. >6?

Did all patients get bilateral chest tubes ("chest drains in both pleurae")p.4, paragraph 2. If so, why, for an extrathoracic operation?

Please state the type of metal bar (steel, titanium, etc.). Was there any metal allergy noted? It would be helpful to report that in the results. In addition, it is customary to report the manufacturer and place of manufacture of any implant as well.

Under results, please clarify, "...there were 6 cases been brothers with different grades of deformity and required surgical repair..." Does this mean that there were 3 sets of two brothers, and the brothers were from 3 different families? It could also mean that there were 6 brothers from one family, or other combinations.

How did you determine NYHA classification? Surgeon determination? Referring doctor? Did any patients have actual heart failure, or is it just that the NYHA symptoms classification fit the patients' complaints? It would help to explain this better in the methods.

Please clarify the pain assessment. In Table 4, does "Pre-op" mean what the patient complained of in the clinic, before surgery, or pain immediately after operation? Again, it would be helpful to make this more clear in the methods.

Did patients fill out a form to indicate "patient satisfaction" (p.7, last paragraph)? If so, it should be cited or added as an appendix. If not, how satisfaction was determined should be made clear (did the surgeon ask, or someone else in the clinic; how long after surgery was satisfaction assessed?).

**Level of interest**
Please indicate how interesting you found the manuscript:

An article whose findings are important to those with closely related research interests

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Needs some language corrections before being published

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If you can answer no to all of the above, write 'I declare that I have no competing interests' below. If your reply is yes to any, please give details below.

I am a consultant to Zimmer Biomet, for design of the next generation of bars and instruments to be used for the Nuss procedure.

I do not believe that this constitutes a conflict of interest for this report of the open operation for pectus excavatum.

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