Reviewer’s report

Title: Protocol for a scoping review to map evidence from randomised controlled trials on paediatric eye disease to disease burden.

Version: 0 Date: 18 Jun 2017

Reviewer: Natalie Strobel

Reviewer’s report:

Overall comment: Based on the requirements of a systematic review, for example dual screening, data extraction and the objectives of your review, I don't believe this review is correctly categorised within the evidence synthesis space. Objectives 1,2,3 and 5 discuss the how many trials and the distribution of these trials by disease. It appears you are not interested in the effectiveness of any of the interventions you are reviewing. For example you aren't doing any meta-analysis or looking at the quality of your evidence (GRADE). As such I would recommend the authors consider revising the methods of this review as a scoping study, gap mapping or an evidence mapping review and making the appropriate changes. Or include appropriate information on the effectiveness of the interventions they are collecting (eg statistical analysis) and change the screening and data extraction parts of the protocol to include two people for all stages.

Also I don't think the screening and data extraction procedure is enough to reduce error and bias. Other than the 20% FT screen check by a second author all other processes are completed by one person. This may result in many errors during the process and is not strict enough for a systematic or scoping review. I would recommend dual FT screen and data extraction at the minimum for the scoping review and if the authors still keep the systematic review method then dual screening and data extraction at all stages.

Objective 4 and Determining the distribution of burden of disease: I am unclear how this occurs. The explanation given in lines 26-31 do not adequately explain how this is going to be achieved. What will you be doing with the data you collect to the UK reference? When you mean distribution is this for age, disease, geography? More information is needed in this section.

Search strategy: Will you be looking at reference lists of included studies?

Types of studies: Will you be including quasi-RCTs (i.e. in which allocation is not truly random - such as alternative walk-in into the clinic) in the review?

Primary outcomes: Are there ways that the primary outcomes will be measured? Are there unacceptable ways that you would not include in this review?

Data extraction: You mention secondary outcomes as part of the data extraction, however, there are no secondary outcomes mentioned. Can you please clarify whether there are secondary outcomes and if so what will these be.
Discussion: In the discussion you have the following sentence. What do you mean by 'level of RCT evidence'?

'No study has investigated this question of the association between the level of RCT evidence on interventions and the burden of disorders that cause visual disability.'

In the discussion you also discuss mention: 'Therefore the aim of this review is to ascertain whether randomised trials of interventions to prevent or treat eye and vision disorders that cause SVI/BL in children, actually reflect the burden of disease in industrialised countries for whom the necessary data on burden of disease are available.'

I'm not clear how you are doing this in the methods. I understand this is about the 'distribution of burden of disease' however the methods don't clearly articulate how this is going to be achieved. As mentioned before this needs to be made clearer.

PRISMA statement 15d: You need to describe the data synthesis even if it's not quantitative. I believe you do this under the 'analysis' heading.

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