

LETTER TO EDITOR

A Review on the Article Titled "Comparison of Liquid Tissue Adhesive and Suture in Pediatric Wound Repair; a Case Control Study"

Razieh Sadat Mousavi-Roknabadi¹

1. Department of Emergency Medicine, Shiraz University of Medical Sciences, Shiraz, Iran.

***Corresponding author:** Razieh Sadat Mousavi-Roknabadi; **E-mail:** mousavi_razieh@sums.ac.ir

Dear Editor-in-Chief of Iranian Journal of Emergency Medicine

In volume 5 of the journal (2018), a paper was published titled "Comparison of Liquid Tissue Adhesive and Suture in Pediatric Wound Repair; a Case Control Study", about which some points and questions should be raised:

1. In the title and methods section of this paper, the authors stated that this study is a "case control study", while case-control studies are a type of observational study, which start with the outcome and end with exposure; as patients (as case group) and non-patients (as control group) will be questioned or examined regarding previous exposure. In addition, since they are observational, no interventions are performed in this type of study. However, the methods described in this article stated that two methods of wound healing (therapeutic intervention) were applied on patients with facial scars, and the outcomes were evaluated after 4 and 6 days. Moreover, in the purpose of the study, which was mentioned at the end of the introduction, it was stated that "the purpose of this study was to investigate the outcome of wound healing in pediatric patients using two methods of tissue and suture adhesives." This sentence certifies that the study has measured the outcome, not the exposure. In fact, in this study, the case and control groups have not been evaluated regarding a previous exposure, and it seems that the design of the study is more similar to quasi-experimental studies. In addition, the word "uncontrolled" that appeared in the first line of methods should better be explained accurately.
2. On the other hand, if this is a case-control study, odds ratio (OR) with confidence interval should be calculated and reported in the results.
3. Additionally, the method of measuring patient and parent satisfaction levels is ambiguous and additional information should be added to the study.

Considering the mentioned points, it seems that corrections should be made and extra explanations should be added to this article.
