

# Letter to the Editor

## Erythropoietin to Prevent Transfusions in Premature Infants

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Dear Editor:

We read with interest the systematic review and meta-analysis by Kotto-Kome et al.<sup>1</sup> on the effect of beginning recombinant erythropoietin treatment within the first week of life on “early” and “late” erythrocyte transfusions among very low birth weight infants. The authors concluded that while erythropoietin cannot be expected to completely eliminate erythrocyte transfusions in neonates, if given in the first week of life, it can reduce the proportion of neonates who will receive “early” transfusion and significantly reduce the proportion of those who will receive “late” transfusions.

We have several methodologic concerns with the review. First, the reporting of the review fails to conform to the recommended standards for reporting of systematic reviews as outlined in the QUOROM statement<sup>2</sup> and this makes it difficult to verify some of the statements made in the review. For example, one cannot recalculate the pooled point estimate using other models due to lack of reported success rate in individual studies in Table 4. Second, selection, language and publication biases are potential threats to the validity of the reported meta-analysis due to the limited search strategy. While authors searched the Medline

database since 1990, search of other databases such as EMBASE, unpublished studies, and studies in abstract form were not explicitly mentioned in the Methods section. Third, blinded assessment of validity of included studies was not reported as well.

Lastly, there is a discrepancy in the pooled estimate and confidence interval reported in the text and table format Table 4 in regard to “late” transfusion. Thus, we believe that the results of this study need to be interpreted with caution given the many methodologic deficiencies of the review.

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### References

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