

Review of: "Demographic and Clinical Characteristics of Refugee Children Utilizing Healthcare Services of Türkiye (2021-2022): A Single-Centre Study"

Maria Kazantzi¹

¹ Aghia Sophia Children's Hospital

Potential competing interests: No potential competing interests to declare.

Thank you for asking me to review this manuscript, which aims to describe the characteristics of refugee children utilizing healthcare services in Türkiye.

This is a retrospective study of refugee children reaching one single pediatric center during one year. I ran through this paper enthusiastically, hoping to find answers on patterns of healthcare utilization of refugee children, which is indeed an important global issue. The information provided is of interest, and the data for this vulnerable population is scarce.

The sample size is adequate, but it is only a single-center study, and the collection of data was for only one year; a nationwide study for a longer duration would be more informative and would definitely strengthen the results.

SPECIFIC COMMENTS

1. ABSTRACT: "This study demonstrates refugee children's visits... are increasing". This conclusion is arbitrary and not supported by the data, as this is a one-year study and the trend is not studied at all. Otherwise, a baseline should be provided for comparison.
1. Abbreviations are not given the first time a term is inserted in the paper.
2. Multiple grammar and syntax points should be changed, and the quality of written English should be substantially improved.
3. "Upper respiratory infection" and "lower respiratory infection" should possibly be changed to "upper respiratory tract infection" and "lower respiratory tract infection."
4. The Introduction part is way too long, and most of it should be part of the Discussion.
5. INTRODUCTION:
 - a. "The global population... increased to 108.4 million." The verb "increased" is again not supported by data, as no previous data are given and no comparison is made.
 - b. 2nd paragraph, "However, amongst... abuse and neglect." No references are given for this part of the data.
 - c. CDC guidelines are given, but they have no relation to the paper, and they are not used somehow in the paper. If the authors are using these guidelines, they should be included in the Methods part.

7. METHODS:

1. The sentence “resident patients were children with a Turkish ID...” makes no meaning, it should be reviewed.
 2. Parameters collected at ED, OC, and IS should be summarized, as similar parameters collected for all patients are repeated in each paragraph. Moreover, parameters collected, such as supplementary food, are not discussed in the Results part.
 3. As we refer to refugees, possibly the authors should better use international scales for the definition of malnutrition.
 4. The total number of patients who used healthcare services should be provided, even if consent was not obtained, as this is more objective for the size of the issue discussed. Otherwise, the acceptance rate should be presented. More information and analysis is applied correctly to the patients who gave consent.
 5. Triaging should be described in this part instead of the Results’ section.
8. RESULTS: Most of the data given in the text are also presented in the tables. Most information is duplicated, so it is redundant. The Results section should only include information that is not presented in the tables.

TABLES: For binary variables (for example, gender), only one line should be given and the other is easily concluded.