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Letter to the editor

Comment on “COVID-19 infection in children: A systematic review and meta-analysis of clinical features and laboratory findings”



We read with great interest the article by Mansourian and colleagues [1]. The authors analyzed the clinical characteristics of COVID-19 in children by summarizing the clinical and laboratory data reported in previous observational studies. However, we would like to raise several concerns regarding this systematic review and meta-analysis.

First, the authors stated, “This systematic review was conducted following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines.” Thus, the authors should present a full electronic search strategy for at least one database as online supplemental data, including any limits used, so that the search can be repeated [2].

Second, the authors should provide reasons for exclusions at each stage in the PRISMA flow diagram.

Third, we noticed that two articles published in medRxiv were included in this systematic review. As is known, preprints are preliminary reports of work that have not been certified by peer review, but we did not find the author's description of how to evaluate the quality of these articles. Moreover, the authors did not assess the risk of bias in individual studies according to the PRISMA recommendations, which are mandatory for any systematic review.

Fourth, we were very surprised to find that the authors included a study (reference 7) that was pooled from a national registry from all hospitals in China from December 8, 2019 to February 6, 2020 [3]. Thus, the authors did not exclude studies suspected of including duplicate reporting. We suggest the authors review the hospital and periods of recruitment. When a hospital published their cases more than once, if the periods of recruitment overlapped, only the study with the most data was included to minimize the possibility of double counting [4].

Conflicts of interest

The authors declare no competing interests.

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