Author's response to reviews

Title: Cost effectiveness of epidural steroid injections to manage chronic lower back pain

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Many thanks to the reviewers (hereafter R1 through R3) for reading and for offering reactions. As per R1’s comments, the type of analysis has been more clearly specified, plus material has been re-written and re-positioned to improve clarity. R3’s principal suggestion was to discuss the placebo effect. Excellent idea, and a new paragraph in the Discussion develops the results in that direction. Similarly, we’ve added some remarks on time-frame, as per R1’s request. R2 opined simply that the manuscript was uninteresting and unsound, but failed to explain why. We sought further guidance but received no enlightenment. We are guessing that the problem as perceived was not unlike that observed by R1. R1’s remarks, taken together, indicated to us that our original design for the analysis was wrong. So, instead of aggregating the two dosage samples, we have re-worked the data as comparisons against baseline for each of the two dosages for each of the 40-odd patients. Analysed in this fashion, R1’s questions of “aggregate data seem to be implied”, “confidence intervals for the QALY” and statistical tests for pooled data are answered automatically, because they related to our original (inferior) method. Not surprisingly, the new ICER results are not greatly different from the old, but the calculations are now logically robust. Beyond the reviewers comments, we have added additional supporting references to recent research. Since we submitted the original manuscript, the UK Audit Commission has issued a report on the consequences of ambiguities in procedure classification, which our study exemplifies. We’ve included another possible tariff for cost and have made reference to the ambiguities in the Discussion.