Reviewer’s report

Title: Quality of life 6 months after surgical intensive care

Version: 2 Date: 18 April 2007

Reviewer: Cristina Granja

Reviewer’s report:

General

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Page 6
Lines 14 to 16 – re-write. The full term should be used not the abbreviation between parentheses.

Page 7
Statistical methods
I can not understand the difference between first and second paragraph. Please correct.
Please clarify the definition of the dependent variable “changes in health question of SF-36” and give a reference.
Please explain why you didn’t use the domains of SF-36 or the SF-36 global scores as dependent variables in your regression models (of course in that case the model used should not be the logistic).

Page 9
Lines 1-2
I could not see in the methods section a reference to a perceived general health status. Is it the domain of the SF-36 called general health? Authors sometime also call it general health perception. Please make it clear.

Page 10
Please describe in the methods section how you did the evaluation of internal reliability (or internal consistency). You present the analysis in the results section but do not mention it in the methods section.

Page 11
Discussion
Globally, Discussion needs to be focused on the subject of the study.
Discussion is difficult to follow. Please make clear why do you analyse HRQOL and differences in HRQOL. After that, comment, and in first place, determinants of HRQOL, and only after that, comment determinants of HRQOL differences. Otherwise the reader may become confused.

Page 12
Lines 6 - 7
SAPS II may be a determinant of HRQOL. This has been extensively studied in the literature. I do not see why a severity of disease prognostic tool, meant to prognosis evaluation of the risk of death at ICU admission should “reflect HRQOL after ICU”. Please be very cautious and careful with language and concepts.
Also, authors can not infer properties of different tools. I do not see why ASA PS is a “better measure of co-morbidities”. It is not understandable what you mean by a measure of co-morbidity. Please be cautious with concepts. I suggest that you cut lines 6 to 8.

Lines 14-18
If previous health state was not evaluated in your study you are not allowed to try to explain previous conditions with SAPS II or ASA PS, if you do not separate the different components of each tool you will never know if a high SAPS II or a high ASA PS is due to a serious physiological derangement or to previous chronic disease. It is not acceptable that authors make this kind of inferences. Please re-write these paragraphs.
Last line
Again, you can not make this inference as you did not study previous health state. Not acceptable.

Page 13
Lines 17-20
Needs English editing – not understandable.

Page 14
Line 5
Explain what you mean by “in those parameters”. Please re-write.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:
I declare that I have no competing interests.