Reviewer's report

Title: Cost-utility of enoxaparin compared with unfractionated heparin in unstable coronary artery disease

Authors:

Tricia Nicholson (apn@soton.ac.uk)
Alistair McGuire (A.Mcguire@city.ac.uk)
Ruairidh Milne (R.Milne@soton.ac.uk)

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Reviewer: Jean-Pierre Boissel

Level of interest: A paper of limited interest

Advice on publication: Accept without revision

1) This paper reports a cost-utility analysis of enoxaparin as a treatment of unstable coronary disease compared to unfractionated heparin (UFH). The reason for choosing enoxaparin among the low molecular weight heparins is unclear. If enoxaparin is really better in terms of cost-utility than UFH, what about the others?

2) As with all similar cost-utility (and cost-effectiveness) studies, the authors had to make numerous assumptions the validity of which is difficult, if not impossible, to assess. They performed a rather extensive sensitivity analysis, which, actually attenuates this limitation. However, it does not clear it out entirely.

3) The values introduced in the model for the cost parameters have been drawn from the UK environment, making the results to apply essentially to UK health care setting, and of limited value for other settings.

4) The referee was unable to check the relevance and validity of these values. Since the results are extremely depend on them, one should trust the authors for their careful proper selection.

5) The explanation the authors gave for not using the meta-analysis results is not convincing. In any case, it looks more appropriate to rely on properly pooled data, which have a better external validity, rather than on individual, selected, trial results. For missing outcomes, the authors could have contacted the investigators and done the meta-analysis themselves.

6) As any report in pharmacoeconomics, the paper is difficult to read for a physician with limited background and skills in the field.

7) In total, I doubt this paper will be informative enough to clinicians or any health care givers in countries other than UK, with different patients, divers concomitant treatments.

Competing interests:
None declared.