Reviewer’s report

Title: Is population screening for abdominal aortic aneurysm cost-effective?

Version: 2 Date: 5 April 2008

Reviewer: Andrew Tambyraja

Reviewer’s report:

This manuscript is of some interest. In general, it is very well written. There are a few minor typographical and formatting errors:

a) Please write acronyms out in full at least once - ICER
b) Ultrasound scan is more conventionally shortened to US rather than UL
c) Pg5 para 2 line 3 ‘mobile’
d) table 2 mislabelled as table 1

My main problem with this paper is to do with its aims and conclusions. The aims are worthy. However, the problem with trying to do a systematic review of the available evidence is that every country has different tariffs for healthcare service provision and cross examination is flawed.

Although, i agree that certain assumption that have been made may not be entirely sound, the individual conclusions of cost effectiveness cannot be challenged on the basis of this systematic review. The all cause mortality rate of patients with AAA is certainly greater than the average population. However, patients with AAA can return to a QoL that is comparable to the average population (Dick WJS 2008, Hill JVS 2007).

I do not support this interpretation of the existing evidence and as such am unable to recommend it for publication.

Level of interest: An article of limited interest

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

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I am a vascular surgeon who will be involved in the treatment of patients identified from the impending implementation of screening programmes.