Author's response to reviews

Title: Age- and Gender-related Prevalence of Multimorbidity in Primary Care: the Swiss FIRE Project

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Author's response to reviews: see over
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Miss Eden Bobier
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Re: MS: 7771512297086762. “Age- and Gender-related Prevalence of Multimorbidity in Primary Care: the Swiss FIRE Project”

Dear Editorial Team

Thank you for the opportunity to respond to the reviewer`s comments on the above-referenced manuscript. We believe we have made the appropriate changes, meeting each concern.

Enclosed we provide a detailed point-by-point response to each reviewer’s comments. We trust you find our resubmission satisfactory and hope you consider our work suitable for publication.

Yours sincerely,

Vladimir Kaplan, MD, MPH
Response to reviewer 1

1. Page 6 1st paragraph third last line: this would read better as: “Only medical conditions addressed during any encounter were coded (rather than the double negative you are using here):
The appropriate change was made: Only those medical conditions addressed during any encounter were coded.

2. Page 7: Statistical analysis line 1. The opening sentence does not make sense. I would suggest something like: This study has a cluster sample study design, and we adjusted for the cluster in the analyses.
The appropriate change: The study had a cluster sample design, and we adjusted for the clusters in the analyses.

3. Page 13 last para, line 1: it is more than ‘conventional wisdom. It is proven. I suggest you report that to be the case and include an additional reference to support the statement.
Appropriate change: It is proven (ref. 18).

4. Page 14: last para, line 6 does not scan. I think you need to deleted ‘our data capture the actual” and ‘are’ after estimates. Further, I really do not understand the difference between the population that consults general practitioners and the ‘primary care population. This suggests that each GP has a patient list in your country, and these patients always go to that practice. If that is the case you need to make it clear here. If that is not the case, then the two things are the same.
Appropriate changes: Second, our data capture the actual prevalence estimates of multimorbidity in the population that consults general practitioners, and not the prevalence estimates in the general population.

5. Statistical comment.
I see that in Table 2 you get some significant results for the chi square statistic, using the best estimate. However the 95% CIs show no significant difference
between the sexes for these. This is because there is a wide degree of uncertainty in each estimate (because of the cluster sample design). I think if you are going to rely totally on the chi square as your indicator of significance, you need to raise this in the discussion, as a limitation of your work. The 95% CIs will always give you a more conservative result than a chi square, because the point estimates are not affected by the adjustment for the cluster. It is better to take the more conservative estimate when doing multiple comparisons, to reduce the Type 1 error. If you used the CIs to judged significance of differences you would find there are NONE.

Appropriate changes: Forth, the proportion of elderly with one or more chronic health condition was higher for men than women (Table 2) using the chi square statistic, however, no significant differences between sexes were found using 95% confidence intervals. This was due to wide degree of uncertainty in each estimate because of the cluster sample design.

Response to reviewer 2

1. The paper should include “prevalence” in the list of key words because it is the main subject:
   We included prevalence as suggested in the list of key words.

2. In Figure 1, the numbers in thousands are still separated by an apostrophe. I suggest using commas instead as appropriate in English:
   Appropriate changes were made.

3. In Author’s Contributions, for all authors who qualify as such, a sentence saying that all authors gave their final approval of the version to be published should be included.
   Appropriate changes were made: All authors gave their final approval of the version to be published.