Reviewer's report

Title: Diagnostic accuracy of the STRATIFY clinical prediction rule for falls: A systematic review and meta-analysis

Version: 2 Date: 30 May 2012

Reviewer: Michael Von Korff

Reviewer's report:

Title: Diagnostic accuracy of the STRATIFY clinical prediction rule for falls: A systematic review and meta-analysis

Version: 2 Date: 28 February 2012

Reviewer: Michael Von Korff

Report:

Overall comments

This paper presents a carefully conducted systematic review of a single brief screening instrument to aid clinicians in predicting risk of falls. The screening instrument evaluated is the STRATIFY. The rationale for performing a systematic review of STRATIFY as a clinical prediction rule appears to be that it is one of the more widely evaluated screening scales available. The paper is well written, and the conclusions are warranted by the data. The paper suggests future directions for use of STRATIFY in clinical practice, and for possible enhancement of new screening instruments for prediction of fall risk. The value of the paper is an in-depth evaluation of a single screening scale. While the paper reaches similar conclusions as other recent reviews of the performance of fall clinical prediction rules, in-depth evaluation of the performance of a single scale is a useful contribution.

Major compulsory revisions – This is an area with a lot of recent work. In a rapid response by Sascha Koepke et al. to the BMJ paper by Lord and Close, there are citations of reviews that reach similar conclusions to this paper. Please ensure that the relevant recent citations are cited in this paper, and place expand the introduction and discussion somewhat to place the contribution of this paper in the context of the review by Lord and Close, and the reviews cited by Koepke et al., which are somewhat more critical of the value of fall clinical prediction rules.

Level of interest – While the conclusions are not entirely new, the in-depth analysis of a single screening instrument makes this a useful contribution that is of interest. The topic is important and highly relevant to family practitioners.

Quality of written English – The paper is well written.

Statistical review – Not necessary.
Declaration of competing interests – None.

Declaring of competing interests:

I declare that I have no competing interests