Reviewer's report

Title: Cost-Effectiveness of a Mailed Educational Reminder to Increase Colorectal Cancer Screening

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Reviewer: Kelvin K Tsoi

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The authors conducted an economic evaluation study to assess the costs on mailing of educational reminder to increase the response rate on FOBT screening for colorectal cancer among the US Veteran population. They concluded that a simple mailed educational reminder can increase FOBT response rate at an affordable costs. All data based on a previous randomized controlled trial from the same group of investigators and the baseline costs were reasonably assumed. Compared with other existing studies, the cost of intervention is the lowest and the effectiveness is the greatest; and therefore the ICER is only $15 per additional patient screened. The cost-effectiveness analysis was appropriately performed in the baseline estimates, but the results were not extended to different subgroups and some definitions for the sensitivity analysis were arbitrary.

Major comments:

1. In the original randomized controlled trial, some predictors that affects the FOBT compliance were presented, including prior FOBT returned groups, current or recent illicit drug use, different age groups, percentage of Veteran Affairs appt. kept, mood disorder, and current tobacco use. Subgroup analyses should be performed on these predictors and also the general subgroups, such as gender and race groups. All of these information will provide important reference for the decision makers.

2. The ranges for sensitivity analysis for physicians are arbitrary. Some variables can be over 10% variation. For instance, the physicians’ salary and time spending on the letter drafting should be wider ranges. As the author made an assumption on +/-10% on the time for drafting the letter, the sensitivity analysis is only based on the range from 13.5 to 16.5 minutes. Moreover, sensitivity analysis can be presented as a graph to clearly demonstrate the change of a wide ranged variable.

Minor comments:

1. I’m not quite sure the meaning of “First-copy” costs mentioned in P.7. Is it the set-up costs for the intervention? Authors had already presented the startup costs for the reminding letter drafting by the physicians. Detailed items should be listed out. Although there is no universally agreement on handling this cost, assumption can be made for the sensitivity analysis.
2. Any enquiries were raised from the participants? Administrative cost should be included for replying e-mails and phone calls.

3. The paragraph of statistical analysis in P.8 is not applicable to this cost-effectiveness study. I can’t see any t-test, chi square test, Wilcoxon rank sum test were applied in the results. I think this paragraph is copied from the previous publications which is irrelevant and can be eliminated.

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

**Declaration of competing interests:**

I declare that I have no competing interests.