Reviewer’s report

Title: Comorbidity and prognostic indices do not improve the 5-year mortality prediction of components of comprehensive geriatric assessment in hospitalized older patients

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Reviewer: Renzo Rozzini

Reviewer’s report:

Aim of the study is to evaluate the long-term prognostic ability of Comorbidity Index in order to check their eventual role if added to functional and cognitive measures. Authors find that some prognostic models and the Geriatric Index of Comorbidity are better than other widely used indices such as the Charlson Index in predicting 5-year mortality in hospitalized older patients, however, none of these indices is superior to some components of comprehensive geriatric assessment.

This is an interesting paper that gives information about the role of geriatric dimensions in prognosis.

In order to be accepted authors should underline that even if function and cognitive status are the main predictor in the long term prognosis in elderly persons, other factors, like comorbidity (but also social support) need to be assessed in order to give the best care. Function and mental status could be recognized as the background defining elderly health status (i.e. robust, frail, disables, dependent) in which occurring diseases need to be cured and treated in a proper way (i.e. with life saving rather than symptomatic drugs). Information regarding functional and mental status, from one side, and those regarding comorbidities from the other, are complementary and not mutually exclusive.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:

I declare that I have no competing interests