Reviewer’s report

Title: Association between subjective memory complaints and health care utilisation: a three-year follow up

Version: 1 Date: 19 May 2009

Reviewer: Melanie Luppa

Reviewer’s report:

Comments to the Authors

General comment

This manuscript aimed at the association between subjective memory complaints and health care costs and addressed a new and relevant topic. The authors defined the research question well, the data are sound enough, the limitations are clearly stated, title and abstract accurately convey what has been found. However, there are some opened relevant questions not answered in the manuscript.

Comments

Major compulsory revisions

- Methods: How was the health service utilization determined? Especially, at which time point at follow-up? At the end? And for which time point were the total annual costs determined? For those, who had died, the costs at the end of life increased remarkably, as generally known. In all probability, these patients were multi-morbid, possibly fulfilled also the criteria of SMC actually caused the increased health care costs.
- Table 1: Please state chi-square measures and p-values in the table; are the sample characteristics (e.g. age, MMSE) related to baseline?
- Results: Please state, how non-participants were defined? How long were the deceased followed?
- Table 3: What means annualized costs? If the mean of all three years were used, the data may be biased. Please state p-values, explain abbreviations, and include total costs in the table. Why the median of costs was calculated instead of mean?
- Discussion: Diagnostic of depression by the EQ-5D is not possible as you stated in the discussion section, it is imprecise to write adjustment for depression took place. The summarization of the findings should be carried out with more caution. For example, comorbidity of patients was not included and may have affect the results.

Minor essential revisions

- Table 1 was not mentioned in the body of the text.
- There are some orthographic mistakes in the body of the text, and the second crossed reference list should be removed.

Discretionary revisions
- Introduction: Inclusion of the following reference may enhance the introduction section:
- Methods: the proportion of 7% of patients older than 65 years seems very low to me.
- Results: You may check in a sensitivity analysis the results if only the categories ‘poor’ and ‘miserable’ were used for definition of SMC.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**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.