Reviewer's report

Title: Predictors of Mortality among TB-HIV Co-infected Patients being treated for Tuberculosis in Northwest Ethiopia: A retrospective cohort study

Version: 2 Date: 25 January 2013

Reviewer: Amare Deribew

Reviewer's report:

Minor essential revisions:
Please revise for grammatical or spelling errors again. Some other minor essential revisions include:

Methods:
• Please review this sentence: Patients diagnosed as having HIV in any of HIV counseling and testing protocols (i.e., Voluntary counseling and testing, Provider initiated HIV counseling and testing units.
• Please clearly define ambulatory in the text

Results:
• Please revise the word ‘TB location site in the table’. It should be type of TB

Discussion
• Please clarify which group are these patients in the discussion: (These groups of patients may have been diagnosed as having HIV and TB, before their clinical and immunological conditions deteriorate)
• Please remove acronym in the text. Every abbreviation should be explained in the text for the first time
• Why smear positive TB cases are at higher risk of death compared to the smear negative cases? This is not in line with literature? Please give possible justification.

Major compulsory revisions:

Methods:
• Please clearly describe the study settings including the health centers. You have only mentioned only the hospital.
• The design and the patient recruitment procedure are not clearly described the methods. Please describe the design in the method and elaborate the sampling procedure? You have a diagram at the end but you didn’t even cite it in the method.
• How were patients followed? What was done in each follow up?
• It is clear that TB-HIV patients who start ART late or not at all are at higher risk of death. Would you please give strong evidence how you avoided selection bias in this case?
• The ART group has two sub groups (those who were taking ART and developed TB later Vs. those who were taking Anti-TB and started ART later). Why did you include these groups as one? It may introduce bias since those who were taking ART for long are advantageous (more likely to have high CD4 and less likely to die). How many patients were in these sub-groups? Was there a difference in death rate among these sub-groups?

• The national guideline stated that TB/HIV co-infected patients should start ART. Why the other group in the same facilities were denied ART? This issue is not clear in this paper?

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

**Quality of written English:** Needs some language corrections before being published

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

**Declaration of competing interests:**
'I declare that I have no competing interests'