Reviewer's report

Title: Patients receiving opioid maintenance treatment in primary care: Successful chronic hepatitis C care in a real world setting

Version: 1 Date: 14 October 2012

Reviewer: geert robaeys

Reviewer's report:

GENERAL ISSUES TO NOTE
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Please refer to items under discussion using paragraph references (e.g. Methods, third paragraph), rather than manuscript page numbers, as the pages numbers will not match the final version of the published article.

This manuscript handles an important study question. It is clearly drafted and written.

Please mark minor comments (spelling, typographical errors, grammatical errors, stylistic suggestions etc) as "Minor issues not for publication" so that, once addressed, the author may remove them from the review.

3 results - § 1 - line 2: 'opiate use': Must this be 'opiate maintenance use'? see table 1

Can full reference be given for ref 25?

- Major Compulsory Revisions (which the author must respond to before a decision on publication can be reached)

There are some methodological items to be elucidated further: see results + table 1:

Can the authors give more data on the age at which substance use started?

Can the authors clarify what was the definition of 'current substance users': eg the patients used substances intravenously for the last time: before ... weeks, months, ...; what was the amount they used: x/day or week? Was this problematic use, dependency, misuse,.....?

Can the authors define what is meant by 'unstable psychiatric disorder'? Where patients referred to a psychiatrist? Can more data be given on the exact nature, heaviness and numbers of these diseases?

Can the authors define what was meant by 'additional drug abuse'?

What was the definition of 'excessive alcohol consumption': use/abuse (number of drinks a day/ binge drinking)? Can DSM IV criteria be used?

Can the authors give data on the number of patients who are 'homeless'?
In order to compare the data with other patient series:
Can the authors describe more accurately their centre: Is there a systematic and organised direct observed treatment for peg interferon? Is there direct observed treatment for ribavirine? Is there support from a hepatitis c nurse and/or a social worker? Is there a peer group organised? Is there collaboration with psychiatrists, hepatologists or infectiologists,...
Was all hcv treatment given by the GP? Was there a collaboration with a hepatologist? If so, how was it organised? eg: communication, distance to the hepatology centre,... Was a liver punction biopsy performed? Was this necessary for reimbursement? In how many of the cases was liver biopsy accepted to be performed?

Some items can be clarified further:
Can the authors clarify why the age beginning OMT was rather high?
It seems in comparison to other uptake studies that this patient group consisted of more (previous) ex substance users with a better social situation (employed, not homeless?). If so, it is better to mention in the discussion. This permits to compare later to other studies.

**Level of interest:** An article whose findings are important to those with closely related research interests

**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'