Reviewer's report

Title: Trends of Hepatitis A Hospitalization and Risk Factors in Canada Between 1990 and 2003

Version: 2 Date: 26 September 2006

Reviewer: Robert Steffen

Reviewer's report:

General
To decide on possible new strategies against hepatitis A (HA), such as universal immunization, precise data are needed. Thus the authors in detail analyzed HA patient charts in Quebec and confirmed that
- the hospitalization rates of HA have decreased
- the CFR for elderly patients is elevated
- imported HA makes an important proportion of all HA in industrialized countries.

The study was carefully and appropriately planned, but presentation of the data is not always easy to follow. It would have been interesting also to analyse a random sample of charts with other ICD codes, e.g. unspecified hepatitis, to determine whether there would have been additional HA cases - as alluded in the discussion.

The interpretation of the data is cautious as needed. If the paper should add evidence to the discussion about universal immunization against HA, an economic evaluation would have been beneficial.

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

ABSTRACT
In results, the number of analysed hospitalizations should be mentioned (n=1503).

TITLE
Misleading, as the analysis is limited to Quebec. It is inappropriate to generalize on Canada.

METHODS
Was the number of HA in the primary diagnosis 893 (line 2) or 883 (line 4)?

RESULTS
In paragraph 2, the second sentence is difficult to understand; it might be better to state: 'Among the remaining 12 deceased cases, HA was the primary diagnosis in 8 patients (67%). Note that the totals do not add up correctly: If they had 49 charts to review, among those 38 had no HA, contrary to table 1 only 11 (not 12) cases remain. The manuscript may become more palatable if that part would be presented divided in
- Fatal HA (pages 7, 9)
- Non-fatal HA (other)

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

INTRODUCTION
It would be interesting to learn, who considers universal immunization in Quebec/Canada.
DISCUSSION
It is astounding that cases with HA, even fatal ones, sometimes lack of laboratory confirmation - this should be commented.

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

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

Declaration of competing interests:

The reviewer has accepted fee for speaking, organizing and chairing education, consulting and/or serving on advisory boards, also reimbursement for attending meetings and funds for research from Astral, Berna Biotech/Crucell, Baxter, GlaxoSmithKline, Novartis, Optimer, Salix Pharmaceuticals and/or Sanofi Pasteur MSD. He owns shares in Novartis.