Reviewer's report

Title: A 20-year prospective study on mortality and causes of death among hospitalized opioid addicts in Oslo

Version: 1 Date: 5 July 2007

Reviewer: Adenekan Oyefeso

Reviewer's report:

General

There are a number of typographical errors.

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

1. The authors need to determine the diagnostic category of cases at the time of admission. The following questions may need to be addressed?

What diagnostic criteria were used for the study participants? - opioid abuse; opioid dependence; polydrug abuse etc.

How was opioid abuse/dependence confirmed? Was there any urine toxicology or other markers?

How did the authors differentiate between acute overdose on opioids/opiates and acute overdose due to polydrug consumption, where opioids/opiates were also present?

2. There is a clear distinction between treatment for acute drug overdose and opioid/opiate detoxification. The authors' decision to regard both as voluntary detoxifications (page 6) is flawed - Admissions for acute overdose should not be considered voluntary as these occur in life-threatening situations where the patient has little or no control. Secondly, treatment for acute overdose and opioid detoxification are therapeutically different. Consequently, the interpretation of findings is flawed.

3. The authors should provide a brief description of the detoxification regime offered in Ulleval University Hospital - eligibility criteria; the substitute medication used; and treatment duration. The authors should also report the status of patient at discharge (completed treatment; discharge against medical advice etc) as this is known to be a good prognostic factor.

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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)
1. There was a 'method' subsection under the method section. This probably should read 'design' or 'procedure'.

2. In page 8, line 6, the correct word is declined rather than 'was increased'.

3. Also in page 8, paragraph 2, the authors described the self-poisoning and voluntary treatment groups as mutually exclusive. It is also possible that patients treated for self-poisoning also later sought detoxification during the period of study. In table 2, the authors revealed that this was the case, but did not consider the influence of repeated treatment on mortality/survival in data analysis.

4. The term 'violent' death is sometimes used to include suicide, road traffic accidents, homicide, etc. The authors should be specific in their use of this term (page 9).

Discretionary Revisions (which the author can choose to ignore)

The authors may wish to use the term 'crude mortality rates' and their 95%CI; and age and gender differences in mortality rates. Reporting on the median age-at-death would allow comparison with findings from other countries/studies (Page 8).

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

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