Reviewer’s report

Title: Recent patterns in chronic disease mortality in remote living Indigenous Australians

Version: 2 Date: 7 June 2010

Reviewer: John Wakerman

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Thank you for the opportunity to re-read this paper following the authors’ response to reviewers’ comments. The authors have responded to the majority of the details of my review, but also failed to adequately respond to the broader issue of my critique.

In terms of specifics, I maintain that the heterogeneity of communities, towns and suburbs within the ARIA discrete categories of interest is a serious limitation on this classification system and its use in interpreting epidemiological data. That is, the categories of ‘remote’ and ‘very remote’ contain settlements of varying size and access to varying levels of services.

For example, to take some of the settlements cited, Tennant Creek is a town of some 3000 with hospital and primary care services. In the same ‘very remote’ class are small communities including extended family groups on outstations with little or no resident health services.

Further, the ‘outer regional’ settlements cited are suburbs of a state capital city. Whilst ‘the ABS believes that this classification of remoteness is simple and sound for statistical purposes’, this classificatory system does not accurately reflect the nature of settlements in each discrete category.

Tennant Creek is misspelled.

In a broader sense, given these many limitations which the authors have now documented, I remain unconvinced that the authors’ repeated emphasis on the relative size of death rates across geographical categories of very limited utility is particularly useful from a policy or practice perspective. I think this article should be published, with an emphasis on the declining mortality rates, rather than the differences across geographical areas.