Reviewer's report

**Title:** A systematic review of studies measuring health-related quality of life of general injury populations

**Version:** 1  **Date:** 31 August 2010

**Reviewer:** Ruth MA van Nispen

**Reviewer's report:**

The manuscript “a systematic review of studies measuring health-related quality of life of general injury populations” by Polinder et al. was interesting to read. The authors performed an extensive literature search and found 41 relevant studies in different injury populations. Although I have some concerns about the lack of information on the quality of the instruments, the paper is well written.

- In Table 1, the study characteristics and methodological aspects of follow-up studies on the topic are presented. In the last two columns, responsiveness to change and discriminative power are reported and also on p8 and 9. However, the authors report on responsiveness as a statement of whether there was change reported in the study empirically, instead of whether the questionnaire is able to measure change adequately. If, hypothetically, on average there is no change measured at follow-up, this does not necessarily mean that the instrument is not responsive. I think it is worthwhile not only to report narratively on the performance of instruments but also to advise on the best instruments available for injury populations; I guess the authors should focus more on assessing quality of the instrument instead of on assessing if a study measured change empirically. My suggestion is to check the rather new COSMIN checklist, which was recently developed by the VU University in Amsterdam at www.cosmin.nl. They have a lot of information on how to assess instruments, and what quality aspects should be checked. Interesting papers about this topic are written by LB Mokkink.

- Another issue in the discussion section is raised about consensus on which instruments one should use in injury evaluations. Consensus is the most obvious solution, however, researchers usually have their reasons to use their own choice of instruments instead of what is mainstream. Therefore, the recommendation may be altered into something like, use your own instruments, but do add the mainstream best validated instruments, in order to obtain comparability of results across studies / countries etc. If that does not help, there are also methodological solutions in the field of ‘equating scores’, which works about the same as currency converters, where you say a score of 0.77 on the EQ5D is equal to a score of … on the HUI for example. Validation studies should be set up in the methodological field to obtain score equations. In the methodological literature, there are already some examples.

- The EQ5D has the complication that utilities can be <0, meaning a health state worse than death. This information is missing on page 6 and this might
influences comparability with other utility instruments.

- Minor issue: in the author contributions: Dr=MD or PhD? And Drs=MSc or MA or MD?

**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.