Reviewer's report

**Title:** Trends in all cause and liver-related hospitalizations in people with hepatitis B or C: a population-based linkage study

**Version:** 2  **Date:** 3 November 2010

**Reviewer:** Ann-Sofi Duberg

**Reviewer's report:**

In this revised manuscript the authors have answered the points sufficiently.

I have a few comments or "Discretionary revisions" related to your answers on the following:

Q8: It's not necessary to add the new sentence with information on the diagnostic criterias. I think it would be enough to change the first sentence "notified with acute or chronic HCV or HBV infection"... Together with the change in the discussion this is now clarified.

However - resolved infections included in the cohorts could not only underestimate the related liver morbidity, but also, if there was a difference in percentage of resolved infections in the cohorts, for example if there was a high percentage of acute heptatis B in the HBV cohort this could contribute to the difference with a false too low risk in the HBV cohort. Do you have any idea of the percentage of acute infections in the HBV-cohort?

Q10: OK, then you can justify your choice, maybe a comment on that? (Our experience is that much more than 14 days from HBV/HCV diagnosis are needed to get a fairly unbiased risk for hospitalization...)

About the references: You have plenty of references, do they all contribute? Reference 48 "submitted" - is it accepted to use a reference that is not yet published?

**Level of interest:** An article of importance in its field

**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.