Reviewer’s report

Title: Health and Demographic Surveillance Systems: A Step towards Full Vital Registration in Sub Sahara Africa?

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Reviewer: Peter Byass

Reviewer’s report:

I am pleased to see this important consideration of the role that HDSS might have to play along the road towards full VR in Africa.

I have some specific minor revisions to suggest as follows.

1. Some of your data on INDEPTH are not up to date. As it happens, there will be an article on INDEPTH sites coming out in the June edition of the International Journal of Epidemiology, and it may be helpful to refer to that.

2. p12 - I don't think it is true that most HDSS sites are funded by private institutions and foundations. Quite a number are operated by in-country public institutions such as universities, and others from international public funds. There is, nevertheless, in some cases a lack of connection with national interests and priorities.

3. p12 - what evidence do you have to say that "the population covered is in most cases not representative"? I agree that it is extremely difficult to prove that an HDSS population IS representative (because you wouldn't have the HDSS if you already knew enough about the surrounding population to be able to answer that question). However, it is scientifically incorrect to jump to the conclusion that HDSS populations are unrepresentative, just because you can't demonstrate representativity. You may find it helpful to look at a recent paper on the subject PLoS ONE 2011, 6(8): e22897

4. p18 - explaining the differences between individual HDSS and SRS approaches is very important. It is unhelpful though to describe an SVR as only registering events - critically they have to also count the population among which the events occur. The main difference is (a) that there are nodes distributed over a wider area and (b) they are less likely to be concerned with details of morbidity, etc.

5. p19 - cause of death and verbal autopsy is an important area. It would also be appropriate to mention that VA is generally shifting away from using physicians to arrive at cause of death, towards more automated procedures, which are cheaper and faster. You might want to refer to Epidemiologic Reviews 2010; 32:38-55 for more details.
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 chair the INDEPTH Network's Scientific Advisory Committee