Reviewer's report

Title: Quantifying burden of disease to support public health policy in Belgium: opportunities and constraints

Version: 1 Date: 21 July 2014

Reviewer: Theo Vos

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This paper combines three disparate sub-topics: a DALY 101 type lecture; a listing of Belgian data sources that can be used to strengthen burden estimates for Belgium; and a brief description of existing efforts to describe the health of Belgians in DALYs. The three sub-topics are inadequately linked. I would suggest the authors consider (a) reducing the DALY lecture bits (methods have been described better elsewhere); (b) extend the section on Belgian data sources; for instance by taking the top 30 or 40 causes of YLDs in Belgium from GBD2010 (note, contrary to what authors believe, the data are fully downloadable from the IHME website, not just available in visualization tools) and indicating how the listed data sources can improve these estimates (and also indicating where there are gaps in data for important conditions); and (c) more critically discuss the available DALY studies; it is not very helpful to list numbers of DALYs and rankings between studies with very different methods; actually, that should be stressed more as the main point of discussion leading to a conclusion that systematic comparable measurement of Belgians' health is recommended.

By the way, the results in Figures 1 and 2 lack face validity: no YLD for TB and trivial YLD for HIV compared to much larger estimates for Campylobacter in fig 1; larger DALY estimates for rheumatoid arthritis and alcohol dependence than for depression and coronary heart disease in fig 2 also seems highly improbable. I have not checked the original sources from which these figures have been produced and can therefore not comment on what may be wrong in the calculations.