Reviewer's report

Title: Cost, affordability and cost-effectiveness of strategies to control tuberculosis in countries with high HIV prevalence

Version: 4 Date: 19 September 2005

Reviewer: dick menzies

Reviewer's report:

General
1. I particularly appreciated the new tables and the inclusion of more up-to-date cost estimates making the analysis as up-to-date as is humanly possible.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
1. the drop-out rate with ART at 20%. The analysis with drop-out rate of 5% and the differences between 5 and 20% are striking. However I believe that drop-out rate with long term ART of only 20% is still extremely optimistic. When the first effective TB drugs were found, patients’ individual experiences and the community experience with TB was that this was a uniformly fatal disease. Given this, when new effective drugs were available compliance was high. However, over time compliance has dropped off and eventually lead to the development of directly observed therapy. DOT emerged more than 40 years after the introduction of the first effective treatments. I would strongly suggest that the authors present results with a drop-out rate as high as 50% - akin to the experience with TB therapy when the memory of high mortality has receded from the collective experience.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
1. I appreciated the new tables 2-4 but I can not understand section A of each of these three tables. Are the annual costs per patient, or per person in the total population?
2. What are the units for these costs (i.e. are these US$ millions or simply US$)? 3. An even more minor point is the first line in each section lists “baseline (TB treatment)”. What does the (TB treatment) refer to?
4. I think it would be helpful in the figures to list the values for CDR and CR as they have done for ART. This comment would apply to Figures 3-6. In Figure 7 the TB incidence per 100,000 should be added to the Y axis of the left hand part of this Figure.

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions
Level of interest: An article of importance in its field
Quality of written English: Acceptable
Statistical review: No
Declaration of competing interests:

"I declare that I have no competing interests"