Reviewer’s report

Title: Variation in Hepatitis C services may lead to inequity of heath-care provision: a survey of the organisation and delivery of services in the United Kingdom.

Version: 1 Date: 10 August 2005

Reviewer: David Goldberg

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In general, this is an excellent contribution and I would recommend publication. The investigators have undertaken a survey of clinicians who manage persons with chronic Hepatitis C infection; the methods adopted are appropriate and the only major issue I have relates to the presentation of results. What I would like to have seen, and what has not been done, is the organisation of the presentation of the results in relation to the specific question asked and its corresponding scoring choices. It is essential that the reader sees the exact wording of the question. There are two ways of presenting the data; i) each question is used, effectively, as a heading with the results (figures and text) below this and ii) all the results are recorded in the context of a large table which incorporates all the questions, and the figures (results) associated with each of these; such a table would look like the questionnaire itself; the text, relating to the results, would then appear separate from the table but would make reference to it.

Some additional comments:

* On page 2, line 3, of the Results section "the estimated number of patients.........."
* On page 7 "the total estimated prevalent population of patients with CHC managed by CSPs was 22,100.........." I take it that this figure applies to the CSPs participating in the study and not an extrapolation to all CSPs.
* On page 8, it indicates that three CSPs managed over 1000 patients. This seems excessive. Was this all time, or in the previous year? Again, as indicated above, fully appreciating the exact wording of the question asked would help.
* On page 9, last para, I don't fully understand! It appears that 38% (37) of CSPs co-ordinated management strategies for patients with HCV. Then after this, the authors indicate that all 37 had formal links with drug and alcohol teams. Is this correct? I am a bit surprised that none had links with, for example, "services other than DATs and not DATs themselves."
* On page 10, last para - "over 90%.........." Is this over 90% of CSPs?
* On page 11, table 3 - make sure the headings in the tables make it clear to the reader what the data refer to. Again, this may be resolved if you used the method as suggested above. For example, in the part which concerns "patient refusal of treatment", we just have a series of percentages. One then has to look back to see what these mean - i.e. most common reason stated.
* On page 12, there needs to be some explanation of Child Pugh categorisation.
* In Table 4, particularly the lower half is unclear.
* On page 17, line 1. "Further elaboration............public health". It is not the elaboration that will increase the number of people potentially eligible for treatment.
* On page 17, line 9, be specific about what is meant by "testing positive".

I would recommend publication as long as the comments, as indicated above, are addressed.