Reviewer's report

Title: Burden of morbidity in a patient perspective - the case of sick-leave certified patients in primary care

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Reviewer: Nils Fleten

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Re-review Burden of morbidity in an individual perspective – the case of sick-leave certified patients in primary care.

The revision has made the manuscript more accessible.

The suggested major compulsory revisions are to some degree undertaken.

1. The recommendation of introducing a minimum of statistic is not undertaken as the authors consider the 4-week sample of sickness certificates from GP in one Social Security office to be a full scale material. Restricted to description of findings in this limited material this would be acceptable, but of minor general interest.

In Table 1 diagnose distribution in sickness certificate and records is compared

“The diagnosis perspective

Table 1 shows the comparison on a diagnosis level between the two sources of data in terms of ICD-10 chapters. The first obvious difference could be seen when comparing diagnoses in chapter XVIII regarding signs and symptoms, where the proportion of diagnoses was quite higher in the patient records than in the certificates.”

The table show a proportion of chapter XVIII of 9.7% in records and 7.6 % in certificates, a non-significant difference at the 0.05 level, the 95% CI of the 7.6 proportion being (5.0-10.8).

2. The interesting findings of Table 1 is probably the lack of differences in diagnose distribution with the exception of chapter V mental disorders that not unlikely can be explained by the skewness introduced by selecting half the inclusion periods in July?

A discussion of this potential skewness due to half the inclusion period in the main summer hollyday period would be appropriate.

3. A clarification of what the diagnoses in general practice should represent would be appropriate before concluding about the diagnose use based on the actual findings, the main reason(s) for consulting the GP the particular day, or a cross-sectional overview of the current overall burden of sickness and illness for the patient.
If the generally accepted paradigm in Sweden is the latter, the findings might support the conclusion of urgently need of improvement..

**Level of interest:** An article of limited interest

**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