Reviewer’s report

Title: Correcting Misdiagnoses of Asthma: A Cost Effectiveness Analysis

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Reviewer: Roland Buhl

Reviewer’s report:

General comments: Pakhale and colleagues report on a pharmacoeconomic subanalysis of a Canadian longitudinal asthma trial. They demonstrate that questioning even an asthma diagnosis made by a physician can be cost-effective.

Given the readership of the BMC the authors did a good job in writing a pharmacoeconomic paper without too much of pharmacoeconomic tech talk. An exception from this rule is mentioned below.

Special comments:

Page 3, abstract, method, line 4: Health

Page 4, introduction, paragraph 2, lines 7 – 10: The statement describing the diagnostic algorithm is misleading. According to figure 1 and Luks et al. (ERJ 2010) the first diagnostic steps were lung function and bronchial challenge testing, to be followed by tapering off of asthma medication.

Page 12, discussion, paragraph 2, lines 2-3: It does not bother me that I do not understand the specifics of the statistical analyses described on page 8. However, I am sure that the sentence “The non-parametric bootstrapping used … sample size” can be phased differently so that the average reader of the BMC represented by me understands what is meant.

Table 1: The information in this table is not critical for the message of the paper and could easily be presented in an online repository. This is even more so since drug prices in different countries differ, and the authors do not tell us which patients were on which drugs.

Figures 2 and 3 should be changed in a way that the lines representing any medication and daily medication can be distinguished even on a black and white copy.

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 declare that I have no competing interests