Reviewer's report

Title: Annual consultation prevalence of regional musculoskeletal problems in primary care: an observational study

Version: 2 Date: 23 June 2010

Reviewer: Anita Feleus

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Discretionary Revisions
1. Regarding Introduction

Personally, I do not believe that GPs find it more ‘useful’ to work with ‘a regional pain’ compared rather to a diagnostic label. As you also mentioned they often just do not have an alternative, especially in the contacts (consultations) with their patients. Additionally, in nonspecific complaints it often has no implications for management.

2. Regarding chest pain (page 16).

‘There is evidence that the main underlying reason for all chest pain seen in primary care is musculoskeletal with separate studies suggesting that musculoskeletal reasons account for between 20% and 49% of chest pain cases[24-26]. This would all suggest the majority of chest pain consultations in our study were musculoskeletal in nature.’

Still, I am not convinced.

If you want to be more certain about the cause of the code ‘chest pain’, you could check this in the following codes of the same treatment episode of these patients.