Reviewer’s report

Title: Mortality and cause of death in hip fracture patients aged 65 or older - a population-based study

Version: 2 Date: 22 July 2010

Reviewer: Juhana Leppilahti

Reviewer’s report:

Methods: 33 patients were excluded which may cause a bias to the results. More exact flow charts of these excluded patients are needed (gender, age, fracture type, mortality)?

Discussion is perhaps too long and should be shortened.

Writing style is acceptable.

This retrospective population based study has, however, many limitations. Data on patient comorbidities may not be fully comprehensive. The manuscript does not include information on postoperative complications and functional recovery. There are regional differences of mortality and comorbidities between Western and Eastern Finland. Would it give less bias to select the population only from Western Finland?

Does this manuscript offer new aspects to the mortality topic? We know, that several studies have published concerning mortality after hip fractures. It is known that at 50 years of age the total lifetime risk for hip fracture is almost 40% for women and 13% for men (Lane et al 2006). Several studies have shown that mortality after hip fracture is higher in males than females. In the study of Jacobsen et al. (1992) patients aged 65 years and older were divided into four age groups (65-74, 75-84, 85-94 and over 95 years). Mortality was higher in males in all age groups and increased in older patients.

Many authors have also suggested that greater prefracture comorbidity among men may be largely responsible for the observed gender difference. Nutritional status, osteoporosis, and functioning also play a role. In addition Huuskonen et al. reported already at 1999 that Finnish male hip fracture patients had increased mortality 3 times higher than age matched Finnish male population.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the
statistics.

Declaration of competing interests:
'I declare that I have no competing interests'