Author's response to reviews

Title: Incidence and Prevalence of idiopathic inflammatory myopathies among commercially insured, Medicare supplemental insured, and Medicaid enrolled populations: an administrative claims analysis.

Authors:

Karen E Smoyer Tomic (karen.tomic@thomsonreuters.com)
Anthony A Amato (AAMATO@PARTNERS.ORG)
Ancilla W Fernandes (Fernandesa@medimmune.com)

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Author's response to reviews: see over
Response to Reviewers

Reviewer #1 (Dr. Santo)

1. Thank you for your suggestion regarding the manuscript’s title. At your recommendation, we have revised the title to read “Incidence and Prevalence of idiopathic inflammatory myopathies among commercially insured, Medicare supplemental insured, and Medicaid enrolled populations.”

2. We have removed the first occurrence of “Study” from “Study patients were selected for study period.” Thank you for noting this.

3. Clarification of the type of age and sex-adjustment used in the study is given as follows on p. 10.

   For comparison among different data sources, both overall and annual incidence rates were age- and sex-adjusted to a U.S. standard population (2000 U.S. Census using the following formula following Insigna et al. (17):

   \[ \frac{n_{ij}(U.S.)}{N(U.S.)} \times \frac{N(MarketScan)}{n_{ij}(MarketScan)} \]

   where \( N \) is the total population in person-time (in the relevant MarketScan Database or in the 2000 U.S. Census as indicated) and \( n_{ij} \) is the person-time in the specific age and sex strata (from the relevant MarketScan Database or the 2000 U.S. Census as indicated).

4. Thank you for the suggestion regarding clarifying our reporting of prevalence. The reason for the absence of rate adjustment for prevalence is that we wanted to provide prevalence to represent the actual burden of disease in the community at a point in time so that it is useful for the allocation of resources and for program planning, which was in line with the study’s scope and objectives. We have added the following text on p. 8.

   IIM prevalence was calculated to represent the actual burden of disease at a point of time, and was identified similarly to incidence, except that patients were permitted to have a previous IIM claim.

5. We thank you for noting this wording error. We have revised “comorbid comorbidities” to read “comorbid conditions”.


Response to Reviewers

Reviewer #2 (Dr. Badrising)

1. Thank you for your comments. Regarding the shift in DM to PM, this may be due to limitations with administrative claims database including how diagnoses are reported when healthcare claims are filed. Since this is a retrospective, observational study, we feel that it would be speculative to comment on the reason for the shift as this information cannot be determined from the data.

2. Regarding patients with a malignancy, we agree it would be a very interesting topic to examine the types of malignancies most often found among patients with the three types of IIMs; however, it was beyond the scope of the current study which was to provide a more general overview of the characteristics of patients with IIMs.

3. Thank you for your comment on the unclear sentence on p. 18. We have removed this sentence as it does not add needed information to the Discussion.