Reviewer's report

Title: High short-term and long-term excess mortality in geriatric patients after hip fracture: a prospective cohort study in Taiwan

Version: 2 Date: 6 March 2014

Reviewer: Kristin Taraldsen

Reviewer's report:

Minor Essential revisions
The authors provide an important paper highlighting the excess mortality in older persons after hip fracture. There are some changes that I would suggest and some questions that I have after reviewing the paper:

1. The authors need to describe the sample in more details in addition to the information already included in the text and the number and percentage presented in the cutoff groups in Table 2. This is important to be able to know the pre-fracture as well as the baseline characteristics of the sample.

2. Is the group recruited a representative sample of the hip fracture patients admitted to your hospital? The authors should state if they did track all older persons with hip fracture admitted during the inclusion period, for example if the 376 hip fracture patients screened is identical to the numbers that underwent surgery during the inclusion period. If so, this is a strength that should be described. It would also be useful to include this in the discussion, especially because addressing geriatric patients in the title and because of a lower mortality rate than previously reported.

3. Include references if standardized tests or questionnaires are used (f.ex description in the methods and/or in Table 1).

4. It would be helpful to include the research design in first section of the methods where the study participants are described, and perhaps include the length of follow-up period.

5. Describe the Kaplan-Meier as “survival curves” instead of “accumulated mortality rates” and include the length of follow up period in the method. It would be helpful to state how long those who survived where followed, and include this in the Methods for the Mortality data.

6. The authors do discuss the lower mortality rate in this study in terms of explained by “better care” in their hospital. Did both groups get the same treatment in the acute phase, f.ex by geriatricians/at the same ward?

7. The limited number of deaths is included in the discussion and it would be helpful to also include a discussion of the sample/sample size.

8. I suggest that the wording “cause of” is changed in the second aim of the study.

9. Distinguish between pre-fracture and baseline assessments.
10. Correct the numbers describing the follow-up time in the abstract.
11. Include the min-max or standard deviation of days after the fracture when interview took place. I also have a question about how you decided that their conditions were stabilized? (all were able to perform the MMSE early after surgery?)

**Level of interest:** An article of importance in its field

**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