Reviewer's report

Title: Clinic Variation in Recruitment Metrics, Patient Characteristics and Treatment Use in a Randomized Clinical Trial of Osteoarthritis Management

Version: 2 Date: 29 September 2014

Reviewer: George Peat

Reviewer's report:

I am satisfied with the responses, with one exception.

P15. The response and revision:

“Previous research has also shown that identification of OA based on codes from outpatient visits yields lower estimates of disease prevalence than population based studies, therefore indicating a lack of consistent coding for OA [57].”

does not adequately represent the available evidence. The Kopec et al (2008) paper that the authors have selected dealt not with prevalence but with incidence. Furthermore, they did not find that rates from administrative data were necessarily lower than those obtained from population-based studies using other approaches to defining symptomatic OA.

“Rates based on definition 2, although almost 50% lower than those based on definition 1, were higher than radiographic plus symptomatic OA incidence of combined hip, knee, and hand OA in Massachusetts reported by Oliveria et al (15).”

When dealing with prevalence, of course an annual prevalence estimate from healthcare contacts is always going to under-estimate the true population prevalence of any condition because it is seldom the case that 100% of people with the condition access healthcare services in a given year. However, longer period prevalence estimates (e.g. 7-year period prevalence, Jordan et al., ARD 2013) may approach those seen in conventional cross-sectional population surveys.

My original comment was a discretionary revision and they may therefore choose to simply remove the sentence they inserted in the revised manuscript. A fuller engagement with relevant literature on this matter (at least reviews like Bernatsky et al on behalf of the CANRAD group 2013) would strengthen the interpretation of their experiences by placing them in the context of the growing body of evidence on the accuracy, validity and meaning of OA diagnostic coding in healthcare and administrative databases.

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