Reviewer's report

**Title:** Cost-effectiveness comparison between palpation- and ultrasound-guided thyroid fine-needle aspiration biopsies

**Version:** 1  **Date:** 10 November 2008

**Reviewer:** YoungKee Shong

**Reviewer's report:**

Can et al reanalyzed their data and resubmitted manuscript in entirely different format. There are some points for major revision.

In the authors' hand, inadequate samples are too much aompared to the previous reports and my personal expereinece. Onother problem is that the small difference between the two procedures is probably due to the added costs of expensive hemithyroidectomy in every case of inadequate results. Most of the inadequate cytologic results comes from cystic nodules due to small numbers of follicular cells and larger amount of colloids. Hemithyroidectomy is recommended in case of suspicious malignancy or persistently indeterminate cytologic result, not inadequate specimen. If those case with inadequate results (n=8 with USG-guided FNA, n=12 palpation-guided FNA) are excluded, the average cost with USG-guided FNA is 399 Euro and initial paplation-guided FNA is 349 Euro. There should be a reasonable explanation for the utilization of diagnostic hemithyroidectomy in case of inadequate cytologic results. Whether all the cases with inadequate cytologic results that is usually seen in case of mixed echogenic nodules and which usually turn out to be adenomatous goiter, should be clarified.

**Level of interest:** An article of limited interest

**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.