Author’s response to reviews

Title: Health economics: the start of clinical freedom

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Author’s response to reviews:

Dear BioMed Central Editorial Team,

Thank you for your time and attention in reviewing our manuscript entitled: Health economics: the start of clinical freedom. The article, with the following reference MS: 10674212716054, was previously submitted to BMC Health Services Research, receiving feedback from the Editorial Team on August, 24th.

After carefully reviewing each of the referees’ comments, we believe that all of them can be fully addressed in a further version of the manuscript; therefore we enclose an updated version of the manuscript that takes into consideration all the referees’ concerns.

Comments to reviewer 1 (P Ibern)

“The article includes elementary issues and well known controversial discussions on QALYS, but it doesn't add any to the debate. On the other hand contributes to the confusion. Many comments are unnecessary, and are related to an editorial piece rather than an article. The article takes into account several bioethics issues that go beyond economics and are not considered.

The article includes many known references but doesn’t represent an improvement on knowledge, and some comments are obvious”.

The article provides an innovative approach making the clinician a key player in identifying efficiency decisions during daily practice. This innovative approach differs from the common situation in which the decisions of identifying efficient interventions rely mainly on the payer (that is, the one involved in reimbursement or access decisions) rather than on the clinician.

In addition to this, with reference to the reviewer’s following comments; “The article includes well-known controversial discussions on QALYs”, the article does not include any discussion on this since it was not its objective.

We agree with the reviewer that the article should be better suited as an editorial piece rather than an article. For this reason, the paper was originally submitted to the section “Debate” because it meets the journal requirements perfectly. (“Debate articles should present an argument that is not essentially based on
practical research. They can report on all aspects of the subject including sociological and ethical aspects”). In our original cover letter we included a suggestion regarding this: “we believe it should be considered for publication as a Debate Article because it is a very interesting reflection on how doctors may use the results of economic evaluations of health interventions in their daily clinical practice to address both the patient’s and society’s needs.”

We completely agree with the reviewer in that there are bioethical issues that go beyond economics that are not considered. In this regard, a paragraph making reference to ethical concerns has been included in the discussion as well as in the summary section of the article.

Comments to reviewer 2 (Salvador Peiró)

“The paper presents a relatively novel argument, addresses a problem of interest to clinics and healthcare managers and is well argued and referenced. The authors used logical arguments and sound reasoning and the manuscript is written well enough for publication. I have only some discretionary questions (that the authors can choose to ignore)”

In contrast with the previous reviewer, reviewer 2 considers that the article “presents a relatively novel argument and addresses a problem of interest to clinicians”.

We consider the discretionary questions raised by this reviewer as being very interesting, although they have not been addressed since they are outside of the main objective of the article.

Comments to reviewer 3 (Thomas Szucs)

“I think the paper is more a letter to the editor and not an original contribution. It adds very little new insights into the field. However, as a letter it might be acceptable.

So, my suggestion is to reject as is.”

This comment is in line with the comments of reviewer 1. As we highlighted above, the article does not intend to be an original contribution but a novel focus on how clinicians can contribute to the overall efficiency of the healthcare system through identifying, in the individual patient, efficient prescription patterns.

We have reduced the length of the article by one-fourth and we also consider that the “Debate” section is the optimal one for the article to be included.

For all the reasons explained above, we would like to provide you with an updated version of the manuscript that incorporates the answers to the concerns raised by the referees and ask you to consider it again for publication.

Once again, thank you very much for your time and attention.

Yours faithfully,
Jose Sacristan, MD PhD
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