Author's response to reviews

Title: Cost-Effectiveness of Monitoring Glaucoma Patients in Shared Care: an Economic Evaluation alongside a Randomized Controlled Trial

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Author's response to reviews: see over
Dear Mr Graham Mowatt,

Thank you for the opportunity to make a second revision of our manuscript entitled “Cost-Effectiveness of Monitoring Stable Glaucoma Patients in Shared Care: an Economic Evaluation alongside a Randomized Controlled Trial” (MS: 9206910473385012). The changes made as a result of the comments of the associate editor and the reviewers further improved the manuscript and are hopefully acceptable for you.

In the enclosed revised version of the paper, we highlighted the changes made after the first revision. A point-by-point reply in which the comments are addressed, is added as well.

Yours sincerely,
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Enclosed: response on the comments (see below), revised manuscript with changes highlighted
Dear editor,

Please find the point-by-point response on the concerns of the reviewers in this letter. The first reviewer was not available to re-review the manuscript and the second reviewer did not have comments anymore. The third reviewer however had some additional comments.

1. **He believed that we should change back to the word similar where we changed it into equal.**
   In accordance with this comment, we changed back to the word similar in the abstract and the quality of care section.

2. **The reviewer would like to see 95% confidence intervals for the differences between study groups in addition to the p-values presented in Table 4, 5 and 6.**
   Table 4 presents the utilization of care of the study groups. We provided the 95% confidence intervals based on bootstrapping in the table.
   The bootstrap analysis and the Mann-Whitney U-test do not always come to the same conclusion because the Mann-Whitney U-test compares the medians of the study groups and the bootstrap takes into account the differences in the means and the distributions of the groups.
   Table 5 presents the costs per perspective. We provided the confidence intervals per perspective used in the text (and not in the table). We did not provide the confidence intervals for Table 6, as the scenario's presented in that table do not change anything about the uncertainty of the costs. We have therefore removed the p-values in table 6 as well.

3. **In this last comment, the reviewer pointed out a difference in the method of the cost calculation of GDx testing and he would like us to show the result using the same method for both study groups.**
   The reviewer correctly concludes that we used a different price for the GDx test in the two groups. For the usual care group, the GDx costs consist of personnel costs and the GDx imaging device. For the GFU, the GDx costs consist only of the imaging device, as the personnel costs are already included in the price of a visit. The overhead costs were included in the visit costs in both groups. The only fair way to compare the costs of the two groups is to compare the costs of the visits including the GDx test, like we did.
   The suggestion of the reviewer to use the same cost price for the GDx in both groups would lead to a double count of the personnel costs.

Based on the comments of the editor, we expanded on the method of selecting and randomising patients, and on the definition of quality of care.