Reviewer's report

Title: Cost-effectiveness of six strategies for Helicobacter pylori diagnosis and management in uninvestigated dyspepsia

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Reviewer: Xavier Calvet

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Major points

In my opinion, endoscopy is overused in the “test and treat” arms. Even if this reflects a local practice, it is not a strategy that was recommended in current guidelines. Globally, it biases the results in favor of empirical PPI treatment.

Prevalence of Hp infection considered is low. It could be applicable to adult white US population, but are probably underestimating the prevalence of the infection in dyspeptic patients—who have an increased prevalence of Hp infection. In addition prevalence on dyspeptic patient from other ethnic groups could be expected to be even higher. Again this could bias the results in favor of empirical PPI.

Finally, the study seems to apply the efficacy of eradication treatment to prevent the relapse of symptoms in patients with non-ulcer dyspepsia to patients with uninvestigated dyspepsia. This is incorrect as these are two different entities and efficacy of eradication is much higher in uninvestigated dyspepsia than in non-ulcer (functional) dyspepsia. This misinterpretation of the literature could also have heavily biased the study results.

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'