Author's response to reviews

Title: Treatment Incidence of and Medical Utilization for Hospitalized Subjects with Pathologic Fractures in Taiwan - Survey of the 2008 National Health Insurance Data

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Dear Editorial Office:

We have extensively revised our manuscript according to reviewers’ comments. All the changes are highlighted with red colored markers. Thanks for your patience. We would like to have the honor of publishing our manuscript in the journal of BMC Health Serv Res.

§ Responses to the first reviewer (Dr. Jim Whedon)

1. Some revisions of abstract, introduction, materials &methods are performed. [Page2-9]
2. The conclusion is re-written reasonably [Page3, 19]
3. There are three new references cited and discussed.
4. The principal limitation of the present study has been added. [Page18].
5. The discrepancy between the number of cases and number of subjects is described as: Of the 3,094 studied subjects, 5,244 incident cases of various categories of pathologic fracture were identified within one year (i.e. in 2008, Taiwan) that included 3,003 recognized six-major-locations cases and 2,241 almost concomitant but unnamed ones. [Page9, 10]
6. In Taiwan, osteoporosis was a medical issue paid less attention by the health authority and the medical staffs. In practice, most physicians in Taiwan regarded
those senile, possibly osteoporotic fractures as normally traumatic fractures that could be different from the western societies. [See Page14, one reference added to support that situation]

7. Another referenced study and more discussions are added to talk about the medical utilization. [Page16]

§ Responses to the second reviewer (Dr. Henry Mankin)

1. There were some principal limitations in the present study. It is an one-year cross sectional study to investigate the characteristics of those hospitalized pathological fractures based on the National Health Insurance (NHI) dataset and, that claim data is not linked to the death register databank in Taiwan. Therefore, the prospective survival analysis of subsequent events, including complications of the surgery or death, could not been performed. Further information and investigations would be needed in future. [See Page 18]

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