Reviewer's report

Title: Community based study to compare the incidence and health services utilization pyramid for gastrointestinal, respiratory and dermal symptoms

Version: 1 Date: 1 April 2012

Reviewer: Beryl Primrose Gladstone

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Discretionary revisions

1. The authors mention that in the analyses, it has been assumed that the episodes from one week to the next are assumed independent. Noting that respiratory symptoms belonging to a same episode may last longer than a week, as is evident from this community based observation based in Australia where the mean duration of respiratory illness was 6 – 7 days across the ages (Leder K, Sinclair M I, Mitakakis T Z, Hellard ME, Forbes AB: A community-based study of respiratory episodes in Melbourne, Australia. Australian and New Zealand Journal of Public Health 2003, 27(4):399-404), there may be a slight over-estimation of the difference in the health care access for GI compared to respiratory symptoms. GI symptoms over 2 weeks may belong to 2 different episodes while respiratory symptoms over two weeks may belong to the same episode. It may be possible to evaluate this by considering episodes rather than weeks and defining two different episodes as symptoms which are set apart by at least one week of no symptom and the authors can mention in the discussion whether the resulting difference was the same or different.

2. As the data was obtained from a selected population of a trial set-up, the authors have mentioned that the families are usually younger with inclusion of more young children. As a further step to the statement in the discussion “…it is less clear as to the effect this may have had on the comparative frequency by reason” on page 12, is it not possible to look at the relative use of services by various relevant age groups? If it’s possible, it may also be interesting to reflect these relative use of services by standardizing according to the general population of the town or country….

3. In Table 2, it is not very clear as to whether the percentages in the second and third subheadings refer to the whole population or to the proportion of the population with symptoms stated under the earlier subheading.

4. Table 3 would be more clear if there are raw numbers in.

5. In Figure 1, it would be more easily readable if the values were for - per 100 person years

6. In the results section, the second paragraph in page 9, it says “The pattern of presentation to primary care doctors ….varied qualitatively similarly”, what does “qualitatively” mean?
Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

I declare that I have no competing interests