Author’s response to reviews

Title: Weekend admission to hospital has a higher risk of death in the elective setting than in the emergency setting: a retrospective database study of National Health Service hospitals in England.

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Author’s response to reviews:

Dear Editors

Re: MS: 1382187966576613

Thank you for inviting us to make a revised submission.

We would like to thank our reviewers for their helpful comments which have led to major changes in the analysis. We have now produced separate analysis for elective and emergency admissions as per the suggestion of Peter Cram. This has lead to a change in the emphasis of the paper and this is now also reflected in our revised title.

We note that the majority of comments from our referees are discretionary.

Below are our responses to specific comments.

Response to reviewer: Aaron Dumont

[Manuscript changed]: The major comment was the need to highlight the novel aspect of our work, which is now clearly expressed by separating elective and emergency admissions.

[Manuscript changed]: We have clarified the methods section to explain the link between ICD-10 diagnosis and HRGs so that the reader can readily see that we have considered the full breadth of comorbidities.

[Manuscript not changed]: Our analysis is aimed at the level of the NHS and we regard our study as a population based study and have therefore not adjusted for any hospital characteristics.

Response to reviewer: Peter Cram
[Manuscript changed]: The major comment was the need to separate our electives and emergencies, which we have now undertaken. We are most grateful for this suggestion.

[Manuscript changed]: The need to consider weekend admissions versus weekend stay is an important observation which we reflect in a revised discussion where we report findings a recent study that considered weekend stay as opposed to weekend admission.

[Manuscript not changed]: We are not aware of any data quality problems in respect of emergency admission classification, but it is possible that the issues raised by the reviewer were confounded, at least in part, by the inclusion of zero day stay emergency admissions. We have now excluded such admission from the analysis.

[Manuscript not changed]: The use of propensity scoring is not without controversy and methodological challenges and so given the consistency of findings from previous large database studies we have not adopted this modelling strategy here.

Response to reviewer: Raquel Barba

[Manuscript changed]: The additional references have now been incorporated into the text.

[Manuscript not changed]: The point about inadequate case-mix adjustment is already made in the text.

Yours sincerely

Mohammed A Mohammed