Reviewer's report

Title: Risk and Consequences of Chemotherapy-Induced Neutropenic Complications in Patients Receiving Daily Filgrastim: The Importance of Duration of Prophylaxis

Version: 3
Date: 17 February 2014
Reviewer: William Renwick

Reviewer's report:

Minor revisions
1. Page 10/11 - Healthcare expenditure - is the $ value a mean or median?
2. Page 11 - Re mortality figures - I understand the mortality data was only available from one of the databases but I think a comment should be made re the apparent differences in proportion of patients in the 3 categories with the data - eg. D1-3 had only 119 of 243 patients (49%), D4-6 75 of 99 (75%) and D>7 34 of 40 (85%). There is a lot more data missing on the D1-3 category which could alter the numbers significantly. Is there any reason why one database had the bulk of patients getting >7 days of prophylaxis? This is an important, as the mortality data is the most instructive in the paper, so the data should be robust.

Discretionary Revisions
3. Page 11 - Re-the risks of CINC and odds ratios, the crude data show results crossing unity and therefore not significant. The adjusted analysis re the "narrow definition for CINC" then gives significant results. Is the "narrow" definition, the taking out of admissions on the day of, or day after- the last filgrastim dose? I think some clarification is required re the definition as it changes the data to be significant as to not statistically significant.
4. General comment - the data may well be outdated with the advent of longer acting colony stimulating factors such as pegfilgrastim whereby the patient gets enough G-CSF for the whole cycle. It would be nice to know some comparison data re numbers of cycles of chemo now treated with daily filgrastim versus longer-acting forms, are they equal, is daily filgrastim no longer a significant component of supportive care?
5. General comment - I am surprised that any clinican would treat a patient with one day of prophylactic filgrastim, yet in this data set - 29% of cycles of chemotherapy had only 1 day of prophylaxis! I cannot understand the clinical scenario where this would be appropriate and therefore it raises a question re the data, or the clinical practice.

Minor essential revision
6. Page 11 cost data - The number of patients >7 is not stated as it was for the D1-3 and D4-6 patients ie after $13,165 (9,595 - 17, 144).
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 I have no competing interests