Reviewer's report

Title: Monitoring the referral system through benchmarking: an entrance gate for evaluating health care systems.

Version: 1 Date: 10 January 2006

Reviewer: Guy Kegels

Reviewer's report:

General

1. This is an excellent paper. The question it tackles is highly relevant, not only for Niger. The methodology is smart and realistic, and the data seem well controlled. It is also clear that the authors have a firm understanding of the reality of health systems (and district systems in particular) in rural Africa. The result is an ingenious contribution to the problem of understanding referral patterns and levels in districts with important problems of accessibility. Furthermore, it is well written.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

None

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

2. There is a somewhat systematic typo in the reference list: 'e' being replaced by 'io' (2 times 'integratiod', 2 times 'stratiogies'), in my copy on pages 11 and 12

Discretionary Revisions (which the author can choose to ignore)

3. Page 2 (Summary; Conclusion): I would suggest: 'It suggests that well functioning health centres can take care of the VAST majority of problems patients present with.'

4. Page 3 (Introduction): first line: 'In urban areas referral systems are not specific enough'. I do understand what is meant, but I would prefer 'In uban areas referral criteria as applied result in many false positives.'

5. Page 8 (Discussion): Third paragraph of the Discussion: 'The referral benchmark is more likely to be under- rather than overestimated. Etc.' I wonder if this paragraph is necessary or very useful. I suppose that the high cost of referral is more directly linked to compliance with referral than with the referral decision itself.

6. Page 9 (Discussion): Second paragraph of page 9: 'The low referral ratios are a reason to invest further...'. Here also, I wonder if this (short) paragraph is necessary. I think the point is made sufficiently well in the next paragraph. Concerning the latter, I sympathise with the argument that comprehensive services are crucial, but I am not necessarily convinced that the 'classical programmes that focus on life-saving interventions' are very much operative at district hospital level; unless I am not well informed, district hospitals at least attempt to provide services that are as comprehensive as possible (be it with important gaps, as indicated in the next paragraph).
What next?: Accept after discretionary revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:
I declare that I have no competing interests.