Reviewer's report

Title: Healthcare Costs and Utilization for Alzheimer's Disease Patients

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Reviewer: K Pietz

Reviewer's report:

This is an excellent article on an important topic. As the authors note, management of Alzheimer's disease will become increasingly important as time goes on. The article is well written and easy to follow.

Discretionary revisions:

Abstract, last sentence: Consider making a more specific statement. The current statement could apply to a wide variety of medical conditions.

At how many hospitals did patients in their study receive care? Is it reasonable to examine hospital-level variation?

Page 9, first paragraph: Odds ratios that are not significant should not be mentioned as if they indicated something important.

I would like to see in the discussion a more complete statement of how the current study adds to existing research.

Minor essential revisions:

The "background" in the abstract is actually an objective.

Page 3, 6th line: The word "beneficiaries" needs a modifier at first use, e.g. Medicare beneficiaries.

The second paragraph on page 3 requires more explanation. How does expansion of Medicare coverage increase MCO exposure to the costs of AD? This statement requires qualification anyway because Part D was not in effect in 2004, the period of their data collection.

The authors should eliminate all sentences that begin with "AD. Sentences should begin with English words.

Major compulsory revisions:

Page 4: How were the study AD patients selected? According to reference 1, 13% of the over-65 population has AD. But the study sample (n = 25,109) is only 4% of the eligible population (n = 627,775). Some explanation is in order.

There is no discussion of the number of deaths. Presumably the primary reason some patients are not enrolled for all of 2004 is that they died. Table 1 should
indicate the number of deaths in each group.

Page 8: There should be a discussion of the distribution of the outcomes. In particular, how many patients in each group had no medical services in 2004?

Page 10: Statements that insufficient physician office visits and excessive medications may lead to adverse outcomes, should be supported by references since they are not results from this study. The statement about insufficient office visits is particularly problematic since reference 1 states that AD patients have 1.3 times more visits to physicians than non-AD patients.