Reviewer's report

Title: Risk Adjustment Performance of Charlson and Elixhauser Comorbidities in ICD-9 and ICD-10 Administrative Databases

Version: 1 Date: 28 June 2007

Reviewer: Hayden Bosworth

Reviewer's report:

General

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

With a c-statistic so low for stroke and stroke, it is not clear one can conclude the measures are valid prognostic predictors of outcome for the five diseases examined. That is the authors' may consider refining their conclusions to reflect that the measures are acceptable prognostic predictors for diabetes, CRF, and CABG.

The authors should point out that charlson was initially created based upon inpatients.

The study design is not ideal given that comorbidity measures were assessed at two different periods. Ideally, the study design would have data from the same time period to avoid any temporal effects

What was the reason and impact of altering the ICD-9-CM?

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

The tables were cut-off on the print version

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Discretionary Revisions (which the author can choose to ignore)

What next?: Reject because too small an advance to publish

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 that I have no competing interests'