Author's response to reviews

Title: Challenge of Verbal Autopsy in the National Death Registration System in Sri Lanka: the past and the future

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Specifically, the handling editor would like to see you emphasize the following points:

1. There is good, almost complete registration of deaths, but only 30% of deaths occur in health care institutions. Most others die at home or are DOA at the hospital.

This is already addressed in the article.

2. Medical certification of deaths outside hospitals is unavailable, so we need VA to obtain the cause of death for nonhospital deaths and DOA cases.

This is yes and is addressed in the article.

3. What are the options to do this in Sri Lanka? What is the feasibility of these options?

Addressed in the discussion and conclusion

4. What is required to increase confidence in medically certified cause of death data for the 30% of deaths that occur in hospital settings?

Training of medical officers is needed and is highlighted in the article.

5. For a commentary, there is no need for an abstract nor is there a need to have a separate methods section. We are more interested in your analysis and insights into the application and impact of VA in Sri Lanka.

The abstract and the methods sections were removed.

6. Your conclusion reads: “Therefore, the authors think that the Standard Verbal Autopsy Questionnaire developed by the World Health Organization and used world over, could be introduced to Sri Lanka to improve quality of COD statistics generated through the DRS.” We would ask you to explore this idea in more depth. How feasible is this? What would be required? What is the likelihood of automated VA diagnostic methods to avoid the need for physician time to implement VA?
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