Reviewer’s report

Title: The effectiveness and cost-effectiveness of treatments for Idiopathic Pulmonary Fibrosis: systematic review, network meta-analysis and health economic evaluation.

Version: 3 Date: 7 October 2014

Reviewer: Cavan Reilly

Reviewer’s report:

Major Compulsory Revisions

The authors have failed to address my critique that some of their assumptions are logically inconsistent (there was not a typo in my report). Perhaps some of the confusion was due to the author’s use of "enter the model"-it would be more accurate to say that all patients are initially unprogressed. I was assuming the model was a model for treatment (in which case patients certainly could enter in a progressed state) but evidently it is a model for the disease process. In that case the start of this paragraph should not talk about a model for interventions.

Here is the confusion regarding the other assumptions as they are spelled out

FVC % predicted >70% indicates unprogressed IPF

okay, fine, that is part of the definition of "unprogressed IPF", so FVC % predicted >70% implies unprogressed IPF but not vice versa? Just make this aspect of the definition of unprogressed IPF more clear. However it is still possible that someone experiences a 10% reduction and has FVC % predicted > 70% in which case they fit the criteria for both the progressed and unprogressed state.

While the authors do report odds ratios in Table 2, SMDs do appear in the text on page 6, hence there was a lack of consistency in presentation.

It’s not clear what "face validity" means in the context of model selection-if that model was selected via AIC that is fine and just say so.

p 9 l 319-then this should read "The combination of azathioprine and ..."

Level of interest: An article of outstanding merit and interest in its field

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.

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