Author's response to reviews

Title: Quality of asthma care under different primary care models in Canada: a population-based study

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Author's response to reviews: see over
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Magdalena Morawska
Executive Editor
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Dear Dr. Morawska,

Please accept the attached revised manuscript, “Quality of asthma care under different primary care models in Canada: a population-based study”. The manuscript has been revised to address the concerns of reviewers – response to reviewers can be found on the page following this letter.

This manuscript is being submitted only to BMC Family Practice and will not be submitted elsewhere while under consideration. The manuscript has not been published, and should it be published in your journal, will not be published elsewhere, either in similar form or verbatim, without permission of the editors.

All authors are responsible for the reported research and submit with confidence this manuscript. All of the authors were involved in the study concept and design. Teresa To was responsible for acquisition of data, and drafting the manuscript. Teresa To, Jun Guan, Andrea Gershon, and Jingqin Zhu were responsible for analysis and interpretation of data. All of the authors revised the manuscript critically for important intellectual content and approved the final version submitted for publication. None of the authors have any competing interest or financial conflicts to disclose.

Sincerely yours,

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Response to Reviewers

Reviewer’s comment:

'page 10 line 148 please be more specific as in your answer to the reviewer 'COPD was also identified using a validated health administrative definition? individuals were defined as having COPD if they were ≥ 35 years of age and had at least one COPD hospitalization and/or one COPD ambulatory care claim.' and add this to the limitation of the study.

Authors’ Response: The line “Individuals were defined as having COPD if they were ≥ 35 years of age and had at least one COPD hospitalization and/or one COPD ambulatory care claim” has been added to the manuscript (page 10, line 148).

The following line was added to the limitations section: “Further, as a large number of individuals were older than 65 years of age, it is possible that they had COPD in addition to asthma, or that the symptoms they were presenting with were those of COPD, thus there is the potential for misclassification or type 2 error.”

Reviewer’s comment:

Also the fact that asthma diagnosis was based on symptoms should be added in the limitations as well.'

Authors’ Response: The following line was added to the limitations section: “When physicians submit claims, they enter an asthma diagnostic code. This is often based on patient symptoms, such as wheeze and cough, and can be subject to error.”