Reviewer’s report

Title: Access to Primary Care is Associated with Better Autoimmune Hepatitis Outcomes in an Urban County Hospital

Version: 2 Date: 5 March 2015

Reviewer: Robert Gish

Reviewer’s report:

Major Compulsory Revisions
1) The abstract needs to be updated with improved English and Syntax
2) The authors need to outline the access to GI/Liver specialists
3) What systems are proposed to decrease loss to follow up patients?
4) Who performed the the dose of the immune suppressant medications?
5) Was there a call back system for patients on medications?
6) Did the authors use a national database such as MediCare or other system to track death rate outside the county health care system to search for those "lost to follow up"?
7) Was the MELD score applied to all patients or only those with cirrhosis?

Minor Essential Revisions

PBC name has been changed to primary biliary cholangitis, reference J Hep, WHO website ICD-11, PBCers, PBC Foundation websites

AST and ALT are not liver function tests: these are liver enzymes
Bili, Alb and INR are liver function tests using 2015 terminology

IV prednisolone is very rarely used for AIH: who received IV steroids, why and for how long?

Discretionary Revisions

the graphs appear blurry when reviewed, high quality TIFF files would be supported

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.
Declaration of competing interests:

Have you in the past five years received reimbursements, fees, funding, or salary from an organisation that may in any way gain or lose financially from the publication of this paper, either now or in the future?  
no

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'I declare that I have no competing interests'

RGG