Title: Sulfonylurea Use and the Risk of Hospital Readmission in Patients with Type 2 Diabetes

Version: 0 Date: 15 Oct 2015

Reviewer: Akira Kubota

Reviewer’s report:

The authors estimated the readmission risk in the two cohorts of SU-monotherapy group and noSU-monotherapy group using Cox proportional hazard regression predicting time to readmission recruiting data from MEPS database.

They found that SU monotherapy patients have about 30% increased risk for readmission compared to other-AHA use and also found that average readmission expenditure of SU users was higher than that of other oral AHA users.

Their findings may be important for the management of treatment using AHAs, there are some points in this manuscript to be revised as follow.

As stated in Discussion, this study includes limits to estimate causal relationship between drug use and the risk of readmission. Because these limits are important and essential of this study, the authors should mention the limits in the abstract to prevent the misunderstanding of their results.

They found that average readmission expenditure of SU users was higher than that of other oral AHA users. The finding about the cost of admission is interesting and important. Therefore comments especially about what makes the difference should be discussed and stated in the discussion.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

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Unable to assess

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Yes

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I am able to assess the statistics

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