**Reviewer’s report**

**Title:** Are the MoreCare Guidelines on reporting of attrition in palliative care research useful to evaluate the statistical appropriateness of a study? A systematic review and meta analysis of randomised controlled trials in palliative care.

**Version:** 0  **Date:** 24 Oct 2019

**Reviewer:** Pedro Emilio Perez Cruz

**Reviewer's report:**

Dear Authors,

Thanks for the opportunity to review this interesting article. Briefly the authors aimed to apply the MORECare taxonomy on reported attrition rates in palliative care randomized controlled trials. The authors performed a systematic review and applied retrospectively the MORECare taxonomy in studies published between 01.01.2010 and 08.10.2016. The authors were able to apply the MORECare taxonomy in 91 out of 119 studies, and found a total attrition rate of 29%. The authors found a rate of attrition due to death of 31.6, attrition due to illness of 17.6 and attrition at random of 50.8. They found no differences in attrition rates between cancer and non-cancer patients, but found that attrition was higher in outpatients than inpatients. Also they found increased attrition rates in longer studies.

The study is extremely interesting and well written. There is consistency between the aim of the study, the methods used and the results reported. The discussion is clear, and highlights some interesting findings. Therefore, I believe that the manuscript should be considered for publication after some minor changes/reviews. Below some comments.

Abstract: Complete and clear

Introduction: It is very complete and clear. Just as a suggestion, and of course, considering wording constraints, it would be interesting for general readers to have a brief description regarding the characteristics of the three types or missing data in general. You mentioned them, but perhaps briefly describing them would be useful for people to compare these definitions with the classification of missing data suggested by MORECare.
Methods: You state that the primary aim is to TEST whether the MORECare taxonomy could be retrospectively applied to PC RCT. If your aim is to test this hypothesis, how would you test this? It seems to me that you did not pre-specified which would be your test and how would you answer this question. If you decided just to make a description and not a test, it is OK, but it is important to be particularly consistent with the aim you defined.

Results. Very well described and presented. Tables are OK. The only issue I would recommend to review is the general description of the studies. Some data is described in the text, but there is some data that is not described. For instance, you described only few types of RCTS (pilot studies, cluster trials, crossover studies, etc.), but what about the others? Are there any characteristics of these studies that should be mentioned?

Discussion: Overall well written. Although you mentioned one limitation, could you please include at least two other limitations for your study and how these limitations could or not impact in the generalizability of your findings? Also, in the conclusion, it is important to highlight that attrition increases in the context of longer trials. What are the major implications from this study?

good luck!

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

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes
Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I recommend additional statistical review

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Please indicate the quality of language in the manuscript:

Acceptable

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