Reviewer's report

Title: A Retrospective, Matched Cohort Study of Potential Drug-Drug Interaction Prevalence and Opioid Utilization in a Diabetic Peripheral Neuropathy Population Initiated on Pregabalin or Duloxetine

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Reviewer: Kenneth Candido

Reviewer's report:

1) I do not identify any major, compulsory revisions of this manuscript. The question posed by the authors is well-defined, and more importantly, the limitations of the study (funded by Pfizer) have bee adequately expressed. In fact, the conflict-of-interest is the only major hurdle to an otherwise well-written document, and, while this is a major issue in that the authors are comparing one of Pfizer’s drugs (Lyrica) versus a competitor’s (Duloxetine) used in an FDA indication for painful diabetic peripheral neuropathy. The essential point is that there are potential drug-to-drug interactions associated with the use of these agents in this patient population. What the authors have done is assess the THEORETICAL (not realized) risk of using either duloxetine or pregabalin to manage the pain of DPN. The methods are appropriate and are well designed. The data are sound, but the limitations of the data are that they represent purely theoretical, and not realized risks. This has been abundantly described by the authors.

2) There are no minor essential revisions to make.

3) There are no discretionary revisions to make.

4) Recommendations for Improvement: The authors have taken a set of database searches regarding use of the respective medications (Pregabalin and Duloxetine), both approved by the U.S. Food and Drug Administration for managing pain of diabetic peripheral neuropathy. They have assessed the potential risks of drug-to-drug interactions in these patients using one or the other of the agents to manage this type of neuropathic pain. The study is one assessing the costs associated with the hypothetical resources allocation that would be necessary IF a certain DDI did occur. As such, it is not based upon any observed DDIs or adverse events, only what would happen IF such events did occur, based upon the labeling in the package inserts of both drugs. That is the major limitation of the study (hypothetical projected analysis or resource allocation in case of an adverse event occurring). This limitation has been appropriately pointed out by the authors.

Level of interest: An article of limited interest

Quality of written English: Acceptable
Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

Let me state that I have been a paid speaker at dinner meetings on behalf of BOTH Pfizer Pharmaceuticals on both Lyrica (Pregabalin) and Celebrex (Celecoxib), and for Eli Lillie Company for Cymbalta (Duloxetine) but have not spoken on behalf of EITHER of these respective companies since at least 2011 and have no plans to speak on behalf of either in the future. I have absolutely no preference for either the use of Lyrica or Cymbalta in terms of use for the management of pain associated with DPN; have never publicly expressed a preference for use of either drug for this purpose; and continue to use both drugs in my clinical medical practice for managing DPN related pain. Furthermore, I routinely switch between the two drugs when one proves to be less effective for managing pain, and as of today, find no distinct clinical advantage for using one over the other.