Reviewer's report

Title: Health-care services utilization and costs associated with radical cystectomy for bladder cancer: a descriptive population-based study in the province of Quebec, Canada

Version: 2 Date: 16 May 2015

Reviewer: Kilian Gust

Reviewer's report:

Dear editors,

I carefully read and reviewed the submitted manuscript “Health-care services utilization and costs associated with radical cystectomy for bladder cancer: a descriptive population-based study in the province of Quebec, Canada” by Santos et al.

Overall, it is a well performed and reported retrospective study of data collected from in a single Canadian province, Quebec. The authors look at the economic aspect of health care provision in the field of urology with focus on costs associated with radical cystectomy for bladder cancer. University centers were compared to community hospitals and data analyzed based on gender, age, and geographic region.

Though I see some minor issues with data and their presentation, which I’m sure can be easily fixed.

Table 2:
Post operative complications: relative data does not add up to 100%
Surgeon annual RC case: load: relative data does not add up to 100%

Table 3:
It would be easier to show separate columns for mean (SD) and median (IQR)

Table 6:
Data should be presented in separate columns for mean and median, SD for means are missing

Figure 3:
Presents the same data set from 42 hospitals with selection to presence of a urology training program in B. Though presented values are not identical.
For example:
Fig 3A: max. value 20,234 $, Fig 3B: max value 20,119 $
Fig 3B: H1=18,362 $, H2=18,364$, while in Fig 3A: H19=18,363 $, H32=18,265$
Most likely these differences are due to some rounding issues, but should be fixed before publication.

Figure 4:
It remains unclear why post-operative complication costs are only presented for 36 of the 42 hospitals.

Figure 5:
Shows 7.81% of total costs for post-operative consultations, while within the abstract and text it is presented as 7%. Either round up or present exact data.

Figure 6:
Graphs are missing labels on axis for “costs in $” and “Time in months”.

The submitted manuscript by Santos et al. delivers interesting data in terms of cost analysis across the province of Quebec in different kind of institutions and geographical regions. Data overall is well discussed and compared to European and US health care systems. As expected, the data provides higher costs for elderly patients in the pre- and post-surgery setting, while differences in cost for cystectomy are minor, but significantly higher.

I am convinced that the authors can easily address the minor issues in terms of presentation of their data and that this very interesting and novel manuscript is acceptable for publication in BMC Health Services Research afterwards.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

No conflicts of interest.