Author's response to reviews

Title: Diabetes, Epidemiological Transition and Health Care Costs in Latin America: Greater Preventive Medicine.

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Author's response to reviews: see over
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BMC Medicine
Dear editor,

With respect to manuscript # 56664488, I attach a revised version in response to the reviewers’ suggestions and comments, as well as to HR’s. To this respect, we would like to make the following observations:

- The abstract has been adjusted based on the recommendations and on our own revision.

- In the background section, a couple of paragraphs were added at the beginning to introduce any reader to the term “epidemiological transition”. Also, concrete examples are given on which type of diseases illustrate this phenomenon and the impact of these epidemiological changes was highlighted in the health systems of the Latin American countries.

- In the same background section, all suggested corrections of errors, grammar and writing were done. We also responded to all of HR’s comments. Errors such as the one mentioning 285 trillion, was corrected to 285 million. The phrase “epidemiological transition in the world” was changed to “global epidemiological transition”.

- In the section on challenges, all changes were accepted, as well as suggestions to add texts for greater clarity and precision, pointed out by HR. Among other points, the countries included in the analysis have been mentioned. We also mention briefly the benefits provided by the new universal coverage schemes, highlighting that these have not been structured to solve in a coherent manner the challenges posed by chronic problems.

- The title of the section on solutions was changed to the one suggested by HR. Besides, we briefly explain some components of the idea of a sociomedical model, the wholistic concept is defined and an example is given of a project now being carried out in Mexico, where a proposal is being incorporated to go
from a biomedical model to a socio-medical model, with emphasis on the prediabetic population.

- In the section on conclusions, we established that the epidemiological tendencies could be measured by monitoring the number of annual cases, in order to be able to, later on, estimate the required economic resources. In the point where we spoke about the mechanism of consolidated purchases, the term was eliminated and we clarify that it refers to a purchase agreement for medicines, made by the health institutions and the pharmaceutical industry. We also eliminated the confusion with respect to the term “clinical, epidemiological, economic and organizational efficiency indicators”, and substituted the term “clinical perspective”, etc.

- In the new version, we highlight the idea of informing the users of health services so that families and patients are empowered, and this will lead to greater effectiveness in the programs for detection and treatment of this disease.

- We accept the suggestion made in the conclusions, and have included a new paragraph with respect to the indirect costs to society.

- With respect to the references, besides HR’s corrections, we corrected the references according to the journal’s requirements.

- We accept the corrections to figure 1 and are sending the original file separately in order to facilitate any editorial work. Finally, we wish to point out that this version has been completely revised in terms of writing, translation and editorial work, by a translator who is specialized in health topics and who is a native English speaker.

Thank you and we await your decision as to our revised manuscript.

Sincerely yours,

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