Reviewer’s report

Title: A SYSTEMATIC REVIEW OF GUIDELINES FOR MANAGING RHEUMATOID ARTHRITIS

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Reviewer: Johannes J. Rasker

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A SYSTEMATIC REVIEW OF GUIDELINES FOR MANAGING RHEUMATOID ARTHRITIS

This is an interesting article as it compares guidelines, showing that apparently there are many truths in the treatment guidelines for RA and these are determined in different ways, not only scientific. It is remarkable that the local cost and refunding appear to be reflected in the guidelines.

1. My first question is: for whom is this article aimed? And what is the value for a clinician reading the article? that should be made clear in introduction and discussion.

Page 3 line 37: In your conclusions you mention "Five general principles transcend most guidelines….etc.

2. Question: would it not be time to conclude: the time has come to agree to one world wide e.g. WHO-ILAR guideline now apparently most agree with these five principles? Why does everyone needs to invent the wheel?

Page 4 line 16-23 you write: "The existence of multiple guidelines raises several questions. First, as they have all had access to the same research data, albeit at different time-points, are there recommendations similar or are there substantial differences between them? Second, why are there different guidelines dealing with the same issue - how best to treat RA? Thirdly, what is the impact of these guidelines on clinical practice? Finally, what guidelines will be needed in future years?"

3. Question: These four questions are very fundamental, but your article does not or hardly give an answer to these, especially not to points 2,3 and 4. Please try to include the answers in the article.

Page 4 lin 30-34: "As a consequence of these assessments we hope to provide some insights into the value and relevance of the different guidelines.'

4. Comment: I cannot find this in your results and discussion sections, please add. Are the British guidelines better than the ones from the other side of The Channel or the Atlantic?

Page 9 line 6-16 :"The importance of frequent assessment is stressed in most guidance. Some guidelines gave relatively specific suggestions. For example EULAR guidelines recommend assessing patients every one to three months, at least in the early stages of their RA. Many guidelines indicated patients should be assessed by rheumatologists at least annually. The English (Royal College of Physicians) guideline gives a very specific recommendation for annual review. The ACR guideline recommended annual assessments of function"

5. Question: please add the choice of the documents in these guidelines. Was the HAQ used to measure function by the ACR?

Page 9 line 23-27: " Two guidelines (British Columbia and BSR established disease) specifically
recommend aiming to suppress joint inflammation, without specifically defining what this implies"

6. Question: do they perhaps mean the number of inflamed joints as measured for example in the DAS-28? It is a generally accepted aim as to suppress joint inflammation as the inflamed joints are the most incapacitating ones and probably also related to joint destruction

Pag 9, line 54-55: "Sixteen guidelines include assessments of prognostic factors. They varied in the degree of detail they consider prognostic features"

7. Question: Please specify these prognostic features. X-rays? MRI? Lab tests?

Page 10 line 16-21: "When there are contraindications to methotrexate or if there are clinically significant adverse events to methotrexate most guidelines recommend considering alternative conventional disease modifying drugs" and

also in page 10 line 34-50 and 56-58

8. Question: please specify which drugs and combinations are mentioned. For a clinician this is insufficient to be clear. Is it SASP? hydroxychloroquine? Corticosteroids? Azathioprine?

Page 11 line 28:

9. Comment: steroids should be corticosteroids

Page 11 line 36: "The EULAR treat to target guideline implied steroids should be used within the treatment strategy in some patients but did give any recommendations about specific therapies".

10. Comment: you mean did not give any recommendations?

Page 13 line 47: "consider the relative strengths and weakness of guidelines in general. In RA the overall the degree ……"

11. Comment: typo: two times the
en adding your comments to the authors.

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.

Unable to assess

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.

Not relevant to this manuscript
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Please indicate the quality of language in the manuscript:

Acceptable

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