**Reviewer’s report**

**Title:** Hospital admissions in Alicante (Spain): A comparative analysis of foreign citizens from high-income countries, immigrants from low-income countries, and Spanish citizens

**Version:** 2  **Date:** 9 September 2013

**Reviewer:** Ugo Fedeli

**Reviewer’s report:**

**MAJOR COMPULSORY REVISIONS**

1. I’m not a native English speaker, but the manuscript requires an extensive re-writing (not simple editing). Many sentences are really difficult to understand, and the paper will require further re-review for contents after the latter will be made clear in a new manuscript.

2. Authors do not provide enough evidence to consider their data as a population-based study. Analyzed hospital discharges include only those from the two described hospitals? In this case, is the number of patients seeking hospital care outside the study area negligible? Are discharges restricted to those of legal residents (the denominator of study rates)? If these conditions do not apply, utilization rates and rate ratios cannot be computed.

3. Standardized as well as crude rate ratios should be provided (denominator data by age for FCs as a whole seem to be available).

4. Demographics of foreign citizens must be more extensively described. If total numbers of residents are available separately for FCHIC and FCLIC, they should be reported.

5. The different distribution of ICD-9 categories reported in Table 3 and extensively described in the text is interesting but biased by differences in overall hospitalization rates between population subgroups (although rates are available for foreign citizens as a whole, and not separately by FCHIC and FCLIC). This should be addressed in Discussion. Moreover, in the text of Results a long list of hospitalization categories less represented in FCLIC than in AC is provided; however for many of these categories differences are no more significant after adjustment for age and gender.

**MINOR COMPULSORY REVISIONS**

1. Findings of the study are compared with literature data as regards the proportion of total hospital admissions accounted by immigrants. However, to compare this finding between different countries and time periods does not seem so interesting. Authors should find contemporary data from Spain (also by searching in the grey literature).

2. The lower proportion of discharges for mental disorders should be more properly commented. Are there barriers to the use of hospital resources for
mental disorders (knowledge of disease, stigma, lack of referral from primary care, etc.)?

3. The higher proportion of emergency admissions among FCLIC should be commented in Discussion.

DISCRETIONARY REVISIONS

1. Authors could consider to restrict their study to younger age classes (e.g. <65 years; they already include only subjects #15 years). This could allow a more useful comparison between AC and FCLIC

2. When comparing the different distribution of main disease categories by population groups, authors could use a slightly different measure, e.g. the proportional morbidity ratio instead of the odds ratio

Level of interest: An article of limited interest

Quality of written English: Not suitable for publication unless extensively edited

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

Declaration of competing interests:

I declare that I have no competing interests