Author's response to reviews

Title: Assessment of the Feasibility of High-Concentration Capsaicin Patches in the Pain Unit of a Tertiary Hospital for a Population of Mixed Refractory Peripheral Neuropathic Pain Syndromes in Non-Diabetic Patients

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With regards to the necessity for consent to publish, it is our policy to require this for any paper where at least 3 indirect patient measures are detailed. Our reasoning behind this is explained in the attached paper. We must therefore once again request that you either obtain consent to publish from the patients featured in your study, or collate and thereby anonymise the patient information featured in your manuscript.

A: “Declaration of Helsinki and the level of protection of confidentiality concerning the protection of personal data as required by Spanish laws (LOPD 15/1999) was ensured. That is, according with this law, the patient information used in this manuscript is considered anonymised. All patients gave their written informed consent (including the publication of the results) for their medical information to be used for purposes of scientific research in accordance with the ethical committee of the participating site. The Ethical Committee approved the informed consent in September 2010.”

Please could you clarify whether capsaicin patches were administered to the participants in your study as part of standard care? Alternatively, was this treatment given for the purposes of your study? This will impact upon whether we think your study requires registration.

A: “Patients included in this study had to fulfill the following eligibility criteria: men or women, ≥18 years old with peripheral neuropathic pain, non-responders to multimodal analgesia and candidates to be treated with the capsaicin patch. No minimum VAS was required for inclusion. Patients with hypersensitivity to the active substance or to any of the excipients were not included. Capsaicin patches were administered to the participants in our study as part of standard care for..."
peripheral neuropathic pain in non-diabetic patients who are non-responders to multimodal analgesia"