Reviewer's report

Title: The case study approach

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Reviewer: Joseph Watine

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Major Compulsory Revisions

As a general comment on Sarah Crowe et al’s manuscript, I would say that despite the authors’ suggestion that their paper intends to be more practical than theoretical, my own impression is quite at the opposite of that. In order to allow the future other readers not to share my own impression I would advise the authors to provide more details about practical examples of case studies that they performed, and also to provide details about practical examples extracted from the literature.

In their introductive sections “what is a case study?” and “what are case studies used for?”, I would suggest that the authors provide details of practical examples of case studies in a way that would allow the readers to better understand in which particular circumstances cases studies enabled specific health problems to be solved. The same could apply to the following sections “defining the case”, “selecting the case(s)”, “collecting and analysing the data”, interpreting the data”, reporting the findings”, and “what are the potential pitfalls and how might researcher avoid these”. When the authors present their examples I would advise that they make it clear to readers how the examples of case studies that they have selected (likely) improved patients outcomes, or, as they put it in their conclusion, “yielded powerful insights into important aspects of health and healthcare delivery”.

In Box 2, “phase 1: academic context:…”, the sentence is cut before it ends (it finishes with the word “and”, which does not make sense to me).

On several occasions the authors allude to ethics. Maybe the authors could better clarify the ethical values that they believe are particularly important in their view as far as case studies are concerned. In doing this they could perhaps keep in mind the fact that moral reasoning in health care is based on four core principles, ie respect for autonomy, non-malevolence, beneficence, and justice. These four core principles are general guides that leave considerable room for judgement in specific cases. The first principle (respect for autonomy) means respecting the decision-making capacities of individuals, thus enabling them to make their own choices. The second principle (non-malevolence) means that healthcare professionals should not harm the patient. Many interventions may cause some harm, but the harm should not be disproportionate to the benefits of interventions. The third principle (beneficence) means that healthcare
professionals should act in a way that benefits the patient in a way that makes sense to the patient. The fourth principle (justice, also called equity) means that patients in similar positions should be treated in a similar manner. In order to introduce a fair allocation of care services into their decisions, medical doctors may have to be aware of geopolitical, socio-economic and cultural circumstances that can vary according to different environments. The medical doctor cannot master such problems on his own, but he has to know them in order to deal with them.

These four core principles might perhaps be used as a guide for the authors to select the practical examples as suggested above, i.e. examples where patients’ autonomy was (likely) improved through case studies, examples where beneficience, or clinical benefits, were (likely) improved through case studies, etc

Minor Essential Revisions

Another general comment is that the authors might perhaps delete some adjectives now and then which do not add anything to what they mean. For example, page 3, at the end of the first paragraph, they write: “; this is in sharp contrast to an experimental design... and manipulate the key variables/exposures of interest”. In this sentence are the words “sharp” and “key” really useful? Couldn’t they be deleted?

Although I have to admit that this is not one of my areas of expertise, the case study approach sounds to be a very interesting approach to me.

Best wishes,

Joseph Watine

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests