Author's response to reviews

Title: Recruiting and retaining GPs and patients in intervention studies: The DEPS-GP project as a case study

Authors:

Michelle K Williamson (m.williamson@unimelb.edu.au)
Jane Pirkis Associate Professor (j.pirkis@unimelb.edu.au)
Jon J Pfaff (jon.pfaff@uwa.edu.au)
Orla Tyson (orla.tyson@uwa.edu.au)
Moira Sim Associate Professor (m.sim@ecu.edu.au)
Ngaire Kerse Associate Professor (n.kerse@auckland.ac.nz)
Nicola T Lautenschlager Professor (nicola.lautenschlager@uwa.edu.au)
Nigel P Stocks Professor (nigel.stocks@adelaide.edu.au)
Osvaldo P Almeida Professor (osvaldo.almeida@uwa.edu.au)

Version: 2 Date: 6 August 2007

Author's response to reviews: see over
Response to reviewers’ comments on
‘Recruiting and retaining GPs and patients in intervention studies: The DEPS-GP project as a case study’

Thank you for the opportunity to revise our manuscript entitled Recruiting and retaining GPs and patients in intervention studies: The DEPS-GP project as a case study in line with reviewers’ comments. We welcome the suggestion of taking this article to a methodological journal and are happy for the revised version of the manuscript to be considered for publication in BMC Medical Research Methodology.

We have addressed the reviewers’ comments in the following ways (changes to the manuscript have been highlighted in yellow):

REVIEWER 1

General:
No comments given.

Major Compulsory Revisions:
This is a description about the recruitment aspects of a RCT requiring GPs in Australia to recruit patients. The methods were relatively flexible (and indeed the protocol was changed to recruit more GPs after starting). The methods were not particularly startling (a total of 4-5% of GPs actually did what was wanted), but the Authors believe some aspects of the method are interesting.

However I am not really convinced. It is not clear what lessons I take home from this, if I were in the design stage of, say, a new RCT. There was nothing especially novel in the methods. Perhaps a focus on recruitment as a challenge is important, and to think about what might be important to GPs is important – CPD points, a topic of interest, and so on. However I am not sure this will generate many citations to be honest. Folk interested in a really important information will be more inclined to go to systematic reviews (of the kind quoted in the reference section!). Moreover, much of this is parochial – so that people in the UK for example will not understand the reference to CPD points, Divisions, and so on.

Perhaps the authors would be better to consider taking this paper amplified appropriately to a methodological journal to discuss the broader aspects of the methods than just the recruitment.

We appreciate the reviewer’s comment, and have made a number of modifications to the paper (see below). We would dispute the reviewer’s comment that it is “unclear what lessons I take home from this”. Table 3 in the Discussion provides a summary highlighting the key learning issues surrounding recruitment and retention that can be ‘taken home’ by others conducting research within the practice setting, and more detailed information is provided in the Discussion.

As noted by this reviewer, there are indeed a number of systematic reviews within this field of research, but none that specifically address recruitment and retention of GPs and their patients for practice based research. We have also added a reference to Croughan, 2001 (in the second paragraph of the Background), which specifically calls for publications of this type to further emphasise the relevance of our contribution.

As per the reviewer’s comment that the manuscript is “parochial”, we wish to point out that this paper is a case study, and it is necessary to adequately describe the context for an international audience so as to establish the significance of our findings regarding recruitment and retention of GPs and their patients. A definition of Divisions of General
Practice in Australia was provided in paragraph three of the Background. A more
detailed description of CPD points has been given in the second paragraph of the
Recruiting GPs to the study section of the Methods.

We welcome the comment that this article would be more suited to a methodological
journal. We defend the focus of this article on recruitment and retention without
discussion of the overall methods. As highlighted in the Background, there is a need for
more knowledge in this area due to the effect it has on the rigour and validity of research
in the practice setting.

Minor Essential Revisions:
Nothing here.

Discretionary Revisions:
Nothing here.

REVIEWER 2

General:
This manuscript capitalizes on a trial to examine important issues of recruitment
and retention of family physicians in research studies conducted within their
practices/with their patients. It is a methods paper that adds to a growing body of
literature about what it takes to engage family physicians in practice-based
research and augments why family physicians start and stop doing studies. It is in
part a case study and in part a qualitative study with methods sufficient to believe
the reported findings about recruitment and retention. As a methods paper, it
could be briefer, and it might be positioned (1) as evidence needed to continue to
move the research enterprise into frontline practice and (2) suggestions/guides for
those doing so.

We believe that overall changes to this manuscript based on the comments from both
reviewers better positions this paper “as evidence needed to continue to move the
research enterprise into frontline practice”. More specifically, we feel that highlighted
changes within the Background and Discussion address this comment. Table 3 in the
Discussion provides a summary of enablers and barriers which other researchers may
find useful.

Major Compulsory Revisions:
1. Please explain what compromised “every effort” made to make the task as
easy as possible and “proactive personal contact?”

In the fourth paragraph of the Encouraging GPs to recruit patients for the postal
questionnaire section of the Methods, the phrase “every effort” has been changed to
“much effort” and an example has been given to show the meaning intended here.

In the third paragraph of the Encouraging GPs to recruit patients as part of the practice
audit section of the Methods, the phrase “proactive personal contact” has been changed
to “energetically pursuing personal contact”

What was the rate of postal questionnaires not useable because of
incorrect addresss, different doctor, being deceased? These details can be
very helpful to others designing and implementing research in family
physician’s offices and would make this manuscript even more useful.
The main aim of the article is to focus on recruitment and retention of GPs and recruitment of their patients for the practice audit. Less emphasis has been given to the response rate during the baseline postal questionnaire phase of the project, because this was passive recruitment rather than active. The response rate is stated in the Postal questionnaire response rate section of the Results. Details of what happened to surveys which were not returned or invalid responses were not collected. There are a number of other studies which look specifically at improving response rates of postal questionnaires. Indeed this literature was consulted during the design phase of this project. We feel that this literature is not relevant to the focus of the current paper.

2. Please emphasize in the discussion, possibly in the first paragraph, exactly what was learned about the methods used to recruit and retain family physicians and why these lessons are important to others conducting research in family physicians’ practices. Consider bringing most important lessons into abstract and especially the conclusion.

We believe we have addressed this criticism by providing a summary of the key learnings within Table 3 and we have modified the location of this table to draw more attention to it. The first paragraph of the Discussion emphasises where this information is located. The conclusion section of the Abstract also draws attention to this summary table. Our Conclusion already states the key learnings around recruitment and retention in the DEPS-GP project, and we have yet again added a reference to Table 3 here.

Minor Essential Revisions:
1. Help international readers know a couple of terms. What are “flow on” effects and what is “beyondblue?”

The phrase “flow on” has been removed from the abstract and the sentence reworded. “beyondblue” has been given its full title - ‘beyondblue: the National Depression Initiative’ in paragraph four of the Background.

2. Please address: Are a 25% interest rate in research and a 3% participation rate at time of survey actually low rates?? Compared to what expectation or experience in other fields?

The following sentence in paragraph one of the Background has been added to highlight why these figures are surprising: “This is surprising considering the very nature of medicine is grounded within scientific research, and that there is a current emphasis on evidence based practice.”

Discretionary Revisions:
Style Issues: Can’t this manuscript be shortened by staying focused on the key lessons learned about the methods to the benefit of readers?

Where appropriate, irrelevant information has been deleted from this manuscript. The article is detailed, but well organised. Readers should be able to obtain required information quickly if they were not interested in reading the whole article. We feel that providing thorough information in a well organised format is preferable to not providing information that another researcher may require.

Do you want to stick with past tense when developing the background information?

Past tense has been used for the majority of the background section. Where the study is described, the present tense has been used because the study is still underway.
Are the results for this methods paper the response rates in the DEPS-GP study or what was learned about recruitment and retention of family physicians?

The results of this study are reported numerically in terms of the number of participants recruited and retained to date. These figures are then considered in relation to the processes and strategies used and reasons for withdrawal in the Discussion. This has been clarified in the first paragraphs of both the Results and Discussion.