Reviewer's report

Title: Putting Prevention into Practice: Barriers and Facilitating Factors Perceived by General Practitioners: Qualitative Study

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Reviewer: John Litt

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Major Compulsory Revisions required

Manuscript review
Title 'Putting Prevention into Practice: Barriers and Facilitating Factors Perceived by General Practitioners: Qualitative Study'
Authors Ulla Walter, Uwe Flick, Anke Neuber, Claudia Fischer, Rugzan J Hussein and Friedrich W Schwartz
Journal BMC Family Practice

General comments
The authors have tackled an important and current area of investigation. Prevention is being given a higher priority in primary care by a number of groups and organisations. The authors explore the beliefs and attitudes of a small group of German GPs in this area and attempt to explain some of the barriers to better delivery of preventive care.

The background is cursory and does not review the key articles in the area (eg Larry Green’s work on prevention frameworks [1-5]. Given that the barriers to prevention in primary care have been studied for more than 20 years, this is surprising.

1. Is the question posed by the authors well defined?
Formal study objectives were not stated

2. Are the methods appropriate and well described?
Use of qualitative methods is appropriate to get at the complex nature of factors that contribute to preventive care. The context of the study could be better explained. For example, a paragraph on the German General practice setting together with any relevant national programs and policies that relate to prevention would be very helpful. There is no discussion of how the sample was generated nor on any strategies to ensure that the research was conducted rigorously. No information is given about the interview questions other than it was ‘pre-tested’

3. Are the data sound?
The authors do not provide a specific framework as a context for their qualitative
analysis nor do they discuss the various strategies to ensure both rigour and validity [6-11]. The results section is poorly structured with little coherence. A discussion of the main themes together with the relevant quotes would provide greater clarity. Some sections don’t seem to separate the direct comments of the GP participants from the authors conclusions.

4. Does the manuscript adhere to the relevant standards for reporting and data deposition?
Can’t determine

5. Are the discussion and conclusions well balanced and adequately supported by the data?
The discussion is not very coherent and reflects the lack of a conceptual framework to guide it. In places the interpretation is very simplistic and/or verges on being judgemental. Examples include: on page 7, last paragraph, the authors state ‘Despite suggestions and the knowledge that patients can do something to counteract their illness, they do nothing; page 8, second paragraph ‘Additionally, since many risk factors are not noticeable, e.g. hypertension and high cholesterol levels, many patients refuse to change their risky health habits because they are not necessarily feeling ill.’; page 9 , second paragraph ‘GPs who provide additional services in their offices stated that the offers were not taken advantage of, or that basically very limited utilisation of the offers was observed. This is due to the lack of willingness of the patients to pay additional costs for preventive care.

6. Are limitations of the work clearly stated?
There is no discussion of the study limitations

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished?
There is some acknowledgement of previous work but the authors have not commented on the large literature in this area. The barriers to prevention have been well documented (see [12-26] as have a range of models to promote better uptake of prevention (see [19, 22, 27-37]). The discussion of this literature is brief, piecemeal and incomplete.

8. Do the title and abstract accurately convey what has been found?
To a limited extent

9. Is the writing acceptable?
The meaning of the writing in a number of areas is unclear and needs to be teased out.

References
1. Green, L. and M. Kreives, Administrative and Policy Diagnosis: From


18. Lawrence, R.S., Summary of workshop sessions of the International


35. RACGP, SNAP (Smoking, Nutrition, Alcohol and Physical activity). A population health guide to behavioural risk factors in general practice. 2004,
Melbourne: RACGP. 1-47.


**Level of interest:** An article of limited interest

**Quality of written English:** Needs some language corrections before being published

**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