Reviewer’s report

Title: The relationship between health literacy and multimorbidity in a primary care setting

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Reviewer: Suad Ghaddar

Reviewer’s report:

The authors address an important topic, health literacy, and investigate its relationship with multimorbidity. The article is well-written. The use of a multimorbidity measure to assess health status, while still subjective, is a strong point and an advancement to many studies in the literature that focus on a global health status measure.

Major Compulsory Revisions

1. The association between health literacy and poor health has been well established in the literature. The absence of a relationship between health literacy and multimorbidity in this manuscript highlights the need for more work in the area. However, the small sample size diminishes the ability to generalize results or draw definitive conclusions. In addition, a more thorough discussion has to elaborate on the implications of the absence of such a relationship; for example, would there be a different approach to handling multi-morbid patients from a health literacy perspective? Both the small sample size and the absence of important implications for study findings weaken the article’s contribution to the literature.

Minor Essential Revisions

2. Table 1 needs a title

3. Table 1: Switching between the actual number of participants (n) and the frequency (%) when reporting descriptive statistics for discrete variables makes it hard for the reader to get a picture of the sample. While frequencies are easier to follow, being consistent in reporting is the most important part.

4. Data analysis section: It would be good to include the dichotomous DBMA measure that is included in Table 1 but not referred to in the text. It is also better to identify the multivariate model used.

5. In the data collection section, it is essential to describe the primary care setting from which the sample was recruited, especially that the authors later on mention that they "expect the same results from similar primary care settings."

Discretionary Revisions

6. It would be good to add more detail to the data collection section. For example, the population served by the family medicine clinic selected for recruitment, how many patients were approached, what percent agreed to
participate, basic characteristics of those who refused.

7. One of the authors’ discussion points is that an "association between health literacy and multimorbidity could exist only when two or more specific diseases individually related to health literacy coexist in an individual, for example diabetes mellitus and heart failure." It would be interesting to investigate the relationship between health literacy and multimorbidity for only these two diseases in the study sample.

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

**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.