Reviewer's report

Title: Enhancing GPs' commitment in a hospital-based study. Rationale, design and participation rates in the Diagest 3 GP motivational study.

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Reviewer: James Larcombe

Reviewer's report:

An interesting subject and the literature (which I briefly checked) appears to be scanty in this field. For these reasons, I think the manuscript could be considered after a major revision - with the proviso that there may not be sufficient material here for an independent paper. The authors may wish to consider whether this information is best incorporated into the paper (I assume there is one) on the qualitative study.

Research question?: this is defined but the authors have provided tangential information that may confuse readers. I recommend that a single focused question - which is about engaging GPs in hospital-based research is introduced clearly. In the background section there is a lot of information about Diagest-2 and -3 neither of which are directly relevant to the question. The qualitative study description is also of little relevance to the research question.

Methods appropriate? This (I think) is an observational study of engaging GPs. What does confuse me is the description of a qualitative study, which of course is not relevant to the research question. I suspect that this separate study may run into the problem of mixed methodologies as it is described as 'a phenomenological grounded theory project', and the details presented here didn't make me confident of appropriate supporting methods for either methodology.

Data sound?: appears fine but limited. Again- need to eliminate data irrelevant to the research question. Unless there is more available data of interest there may not be enough here for an independent paper eg did any one individual - rather than a blanket -approach increase motivation? Any characteristics of responders? Was the attachment of a CRF (which reduced response) a chance action whose effects were just observed- or was this a purposeful act? What was it about the CRF that may have put Drs off - I myself am not sure what it entails- a list of medical details to be extracted from patient notes? What is social labelling and was it used? etc.

Relevant standards for reporting? Looks fine

Discussion and conclusions: well balanced- yes. Supported by data- in the main, though the inclusion of snippets from the qualitative study are unsupported by the data ; the assessment of data quality of blood pressures makes a first
appearance at the end of the discussion section; GPs 'exclusion and disdain' appears in the conclusions with no prior data. How does reference 20 relate to French GPs? Throughout the paper the language/grammar could be a little more correct, but in the discussion it has a greater effect - that and the position of references make it hard to read

Limitations - the authors are quite honest about the limitations they've highlighted but there may be a few more points. The lack of continuity in French General Practice is an important factor, and many couldn't complete the forms. The overall response rate is perhaps on the low side for a questionnaire that has been very actively chased. Do the authors know anything of the characteristics of the non-responders (eg more likely not to know the patient?)

Acknowledged work - yes

Title fine but abstract needs to be tidied to reflect the research question - confused by substantial addition of details about the qualitative study. The conclusion that 1/2 GPs can comply doesn't seem to reflect the results (35/157?). If I have interpreted this incorrectly - apologies - but if so the data lacks clarity

Level of interest: An article of importance in its field

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