Author's response to reviews

Title: GP perspectives of Irritable Bowel Syndrome - an accepted illness, but management deviates from guidelines: a qualitative study

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Version: 2 Date: 3 May 2013

Author's response to reviews: see over
Title: GPs perspectives of Irritable Bowel Syndrome – an accepted illness, but management deviates from guidelines: a qualitative study

We thank the reviewers for their helpful comments. We have dealt with the reviewers comments as listed below and feel that as a result the paper is significantly improved.

Reviewer: Pali Hungin

We thank the reviewer for his positive comments. We agree with the reviewer that GPs may not be well versed with evidence on the effectiveness of CBT and other psychological interventions. There is some evidence of this in the interviews and this was reported on pages 14/15 and has now also been added to the discussion (page 18/19). We also agree that the exposure of many GPs to a more severe and prolonged form of IBS is likely to be restricted, therefore this may not be representative of those GPs who see patients with more severe IBS – we have added a sentence in relation to this to the discussion strengths and limitations (page 17).

Reviewer: Lesley Martine Roberts

Again we thank the reviewer for her positive comments.

Discretionary revisions

1. This has now been changed to the past tense (page 2)
2. This has now been changed to ‘may have implications’ (page 3)

Minor essential revisions

1. Irritable is no longer capitalised (page 2)
2. Abbreviations NICE (page 4) and NIHR (page 5) are now explained
3. Recruitment to the study is now described in more detail (page 7)
4. Typos in quotes have now been corrected (pages 10, 12, 15)
5. Typo on page 17 (benefit from) has now been corrected
6. Typo on page 21 (provision of a) has now been corrected
7. Typo on page 21 (to administer) – this has now been removed

Major compulsory revisions

1. This has now been changed in the abstract to say that GPs “did not feel that a risk assessment tool for patients with IBS would be helpful” (page 3). We have also added “This study is part of a wider study to test the validity of a risk assessment questionnaire in patients with IBS.” under Conflicting Interests.
2. Under the strengths and limitations we suggest that GPs may be more comfortable managing IBS because GPs in the study suggested this was the case. There was no evidence in the interviews that GPs felt that they found IBS a complex diagnosis and difficult to manage. This may be a limitation of the study and we have addressed this in response to the comments from Reviewer 1 and added this to page 17. In the discussion we have added that “despite most GPs agreeing to take part in the risk assessment tool” the majority interviewed did not feel that a risk assessment tool would be useful to them (page 21).

3. We have removed the repetition in relation to patients disengaging with care.

4. We have restructured the first paragraph of the Future research as suggested by the reviewer (page 21).

Reviewer: Linda McGowan

We would like to thank the reviewer for her constructive comments.

We have added more detail in relation to the Risk Assessment Tool and how this was described by the interviewer (Page 8).

Major compulsory revisions:

We agree that the theme heading ‘not contested’ might be too strong, and we have changed the title of the paper and the theme heading to ‘an accepted illness’ (Page 9), which fits better with the data.

We have returned to the data and split the final theme into two (Approaches to management – NICE compliant (Page 13) and Utility of a predictive tool in management and referral (Page 15)), which fits more readily with the data and which, we believe, tells a more coherent story. We have followed the reviewer’s advice and edited some of the data presented. In the discussion, we offer a more conceptual approach to our analysis and results.

Strengths and weaknesses of the study – we have added that GPs may have had a limited understanding of the risk assessment tool, and that use of vignettes may have lead to a better understanding (page 18).

Minor essential revisions:

Typos have been corrected and quotes are now in the same font and labelled in the same way.