Author's response to reviews

Title: Family practice nurses supporting self-management in older patients with osteoarthritis: a randomized trial

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Author's response to reviews:

Dear Sirs,

We hereby thank you and the referees for your comments and the possibility for revising the manuscript. Please find our point-by-point response to your concerns below.

Unfortunately our randomized controlled trial is not in a publicly accessible registry as it was started and performed before prospective registering of these trials became obliged.

In answer to referee 1:
- We followed the suggestion of the referee and quoted the BMJ trial from Busziewicz’s group in the discussion section.
- In the introduction and discussion we have emphasized that this trial was designed to estimate whether this new intervention could produce a sizeable effect as a proof of principle of this type of intervention.
- We considered that the expectation of change was little; this is also mentioned in the introduction. But as said by the second referee: many nurses are practicing this way, it is good to prove that this method has no effect and efforts should be made to find better ways to approach and treat the patients as a nurse.
- The conclusion of the referee that future trials should have more intensive interventions is part of the discussion.

In answer to referee 2:
- As we wanted to keep this trial as close to daily practice as possible we used clinically diagnosed OA patients (by the GP). We therefore selected patients who had the diagnosis OA in their medical record. Meaning, not every patient had an x-ray performed and pain was not the only criterion. OA cases who were referred were excluded as we only wanted to include patients who were treated in primary care. We agree that this gave selection for mild cases, but these patients are also often limited in functioning and have OA symptoms as a frequent
consultation reason. Our procedure of selection of participants was in analogue to the procedure used in the trial mentioned by referee 1 from Buszewicz (BMJ).

- As a measure for the power calculation we took the lower limb scale, as we mainly wanted to detect a difference in this scale. However, we measured four AIMS scales, physical functioning (lower limb scale), pain, social functioning and mood symptoms (affect). This is reported in the "outcome measures" paragraph.

- An intention to treat analysis was not performed as data from drop-outs / lost to follow-up cases was not available. We therefore rewrote, as suggested by the referee, the results paragraph of secondary outcome measures with only the patients who finished the study. No differences in results and subsequently the conclusions appeared.

- The telephone call after three months was a part of the intervention. It was evaluated to what extent patient’s life style was changed and what possibly was necessary to maintain this change. We have rewritten this sentence.

Hopefully we addressed the concerns to your satisfaction. If there are any questions or concerns left, please let me know.

Yours sincerely,

Raymond Wetzels