Reviewer's report

Title: Why do primary care patients with dyspepsia tend to deny upper gastrointestinal endoscopy in Greece? Experiences gained from a qualitative study on rural Greece

Version: 1 Date: 4 September 2010

Reviewer: Anna Gagliardi

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OVERALL
We lack information on how best to promote appropriate health care delivery, partly because there are many influencing factors, including individual patient or provider attribute, nature of the health care intervention, and organizational or system level issues. This study is important because it focuses on how patient factors including knowledge and attitudes influence their use of a health service, and the investigators certainly collected a lot of data, and very appropriately used a theoretical framework to guide data collection and analysis. However, the importance of the topic could be better emphasized by including more background information and justification, more carefully analyzing and reporting the findings, and discussing the findings in the context of additional relevant literature to suggest if and how the findings can be used, or what research is yet required.

MAJOR COMPULSORY REVISIONS

TITLE
Suggest something like:
Upper gastrointestinal endoscopy for dyspepsia: Exploratory study of factors influencing patient compliance in rural Greece

ABSTRACT
Qualitative thematic analysis is a method, factors influencing compliance would be the outcome measure. Last sentence of Results subsection requires rewording to clarify meaning. In Conclusion readers might not understand what non-medical reasons means – either define, or simply mention that key issues were fear and inconvenience

BACKGROUND
TPB is the theoretical framework that informed objectives, methods and analysis for this study and should be introduced in the Methods section. Instead, readers would benefit from more information about factors that influence patient compliance with other clinical indications to highlight what we do not know about patient compliance in general and for dyspepsia to better justify the need and purpose of this investigation. Here it would be important to distinguish why
patient compliance is the issue (thereby focusing on the patient) rather than physician communication with patients/shared decision making (with greater focus on either the physician, or the physician-patient relationship). Also explain why would academic and community-based practice differ? In the last paragraph the authors say it was astounding to find that most patients refused endoscopy – these are findings and should be reported in the Results

METHODS
A little more detail about both qualitative and quantitative analysis would be helpful. It is quite unusual in a qualitative study to interview so many individuals – one generally establishes saturation or informational redundancy as a way to determine sample size and reliability/validity of the findings, and this is not mentioned.

RESULTS
It would be helpful to see a table that defines the TPB constructs and distinguishes themes/sub-themes revealed through grounded analysis. If number of tables and figures is limited, then remove the map of Greece.

One does not usually quantify qualitative responses

Several of the quotes are vague and do not necessarily illustrate the theme or sub-theme – further interview probing may have elicited more specific or detailed responses, plus there appears to be overlap across themes, for example, fear is placed under Attitude and under Inconvenience, and the cause and nature of their fear is not thoroughly described, and perhaps due to lack of probing there is some misinterpretation, for example, how is breathless translated to drowning? For patients who had prior experience, it would be important to know more details about that experience and what it is that deters them from doing it again

Formatting of the Results is difficult to read, consider distinguishing the quotes from the text with italics or indenting, or putting exemplary quotes in a table along with the definition of that theme/sub-theme

DISCUSSION
Findings could be better contextualized with reference to more literature. Elaborate on the implications of these findings for policy and practice, and on suggested future research

MINOR ESSENTIAL REVISIONS
Mention Table 2 earlier in the Results section, not as the last sentence, and remove blank column for Missing Data from Table 2

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Not suitable for publication unless extensively edited
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