Reviewer's report

Title: Do gastrointestinal complaints increase the risk for subsequent medically certified long-term sickness absence? The HUSK study.

Version: 2 Date: 26 May 2011

Reviewer: Jennifer Schurman

Reviewer's report:

I found this manuscript, “Gastrointestinal complaints and certified long-term sickness absence in the HUSK study,” much improved with the current revision. The authors should be commended for undertaking a thoughtful and thorough revision in response to feedback. There remain a few minor areas for improvement as outlined below:

Minor Essential Revisions

General
1. The manuscript continues to contain many spelling and grammatical errors. It will require careful copy-editing prior to any publication.

Background
2. It would be helpful for the authors to specifically state how answering the study questions will advance clinical practice in the final paragraph of the introduction. The authors argue in their response to reviewers that they wished to keep the analyses as is to preserve clinical relevance for primary care physicians, but do not make this point in the manuscript. It would be helpful in terms of providing a stronger context for understanding the implications of study results and the judging the import of this study.

3. The final sentence in the introduction appears misplaced and should be moved to the method.

Results
4. The authors state that “higher levels of GI complaints were observed” for several variables in the first line of the results. However, the effect sizes were so small in several cases that it calls into question the relevance of these findings. The authors may want to include this caveat in the results and/or discussion to provide a more accurate assessment of the weight of these variables upon risk for GI complaints.

5. It would be helpful to state the direction of the associations with gender, level of education, and smoking with risk for LTSA, as well as to remind the reader that these were the only 3 variables with sufficiently high effect sizes to warrant inclusion in the models. This information can only be found in the table and took some time to piece together. A brief comment on these confounding variables also may be helpful in the discussion, at least in terms of stating whether these are consistent with previous findings or not.
6. The authors should be cautious in their language throughout the results, as they use terms such as “stronger,” “strongest,” and “higher” to describe values for subpopulations within the sample without empirical basis. In other words, the authors should perform some type of actual statistical comparison between groups/values to determine whether these differences are, in fact, statistically stronger or higher; alternately, they may wish to modify their language to avoid implied statistical difference when no statistical tests were performed.

7. The authors should include basic statistics for all tests completed, at least in text form. It would be helpful to the reader to see the values of these non-significant tests, as well, and it would allow for later inclusion in meta-analyses or comparison with other samples.

Discussion

8. It was unclear what the authors were referring to in stating that “our results would suggest that management of the investigation and treatment or underlying pathology should continue to be augmented by helping the individual manage their behavior and disability.” Could the authors be more clear about this idea, as it seems central to the issue of clinical relevance? For example, are they referring to mental or physical health in using the term “pathology” and do they mean that investigation as to the cause of the physical symptoms should occur while simultaneously trying to sure up coping resources and minimizing risk of sickness absence at first presentation?

9. What is it about GI symptoms that might predict LTSA beyond the variables accounted for in the current study? Are there ways that the barriers to work associated with GI symptoms could potentially be investigated and/or addressed? This relationship over and above anxiety, depression, and other physical symptoms is an interesting finding and does not get discussed fully.

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.