Author's response to reviews

Title: Health Related Quality of Life and its Influence Factors in Patients with Chronic Gastritis and Peptic Ulcer: A Longitudinal Questionnaire Survey

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Author's response to reviews: see over
Dear editors,

Thank you very much for your comments on our paper: MS: 1401605945957174 - Health Related Quality of Life and its Influence Factors in Patients with Chronic Gastritis and Peptic Ulcer: A Longitudinal Questionnaire Survey.

We have changed it carefully on your requirements.

**Request for the name of ethics committee.**
After obtaining appropriate institutional review board approval of Kunming medical university

**Please upload a copy of questionnaire as an additional file.**
The questionnaire was added as an appendix.

**Please clarify whether the translated questionnaire has been validated and please provide details of the validation process.**
A whole paragraph was added to clarify the validation, and a reference (7) was changed.

In China, research on HRQOL has sharply increased since the 1980s. The simplified Chinese (Mandarin) version of SF-36 (CSF-36) was rigorously developed using forward and backward translation and has demonstrated good reliability and validity in the Chinese general population [6]. Concretely, a three stage protocol was followed including translation, tests of scaling construction and scoring assumptions, validation, and normalization. 1688 respondents recruited by multi-stage mixed sampling in 1000 households in 18 communities of Hangzhou. The results showed the clustering and ordering of item means was the same as that of the source, the item hypothesized scale correlations were identical for all except the social functioning and vitality scales, convergent validity and discriminant validity were satisfactory for all except the social functioning scale, Cronbach’s α coefficients ranged from 0.72 to 0.88 except 0.39 for the social functioning scale and 0.66 for the vitality scale, two weeks test-retest reliability coefficients ranged from 0.66 to 0.94, and finally it could distinguish known groups. It concluded that the Chinese (mainland) version of the SF-36 functioned in the general population quite similarly to the original American population tested [6].
Besides, the CSF-36 was also validated among patients with chronic diseases including hypertension, coronary heart diseases, chronic gastritis and peptic ulcer in China [7]. To make it more in detail, the CSF-36 was used in a longitudinal study consisting of 534 patients in these four chronic disease groups, and the psychometric properties of the scale were evaluated by indicators such as validity and reliability coefficients Cronbach $\alpha$, Pearson $r$, standardized response mean employing correlational analyses, multi-trait scaling analysis, t-tests, factor analyses and structural equation models. It concluded that the CSF-36 showed good validity and reliability but small responsiveness when used in patients, and it is a good and useful instrument for patients with chronic disease at some situations [7].

We are very appreciated for your help.

Sincerely yours,

Chonghua Wan, Ph.D, Prof., On behalf of all authors