Author's response to reviews

Title: Self-assessed health among Thai Elderly

Authors:

Fariha Haseen (far_haseen@yahoo.com)
Ramesh Adhikari (rameships@gmail.com)
Kusol Soonthorndhada (prkst@mahidol.ac.th)

Version: 2 Date: 9 April 2010

Author’s response to reviews:

Dear Editor,

Greetings. Please find attached the revised manuscript,’ Self-assessed health of Thai elderly. The comments and suggestions of the reviewers were incorporated in the manuscript. The response to the reviewers was described as follows. I would be grateful if you consider the article for publication in your journal BMC Geriatrics.

With Best Regards.
Fariha

Author’s response

Response to reviewer 1:

Major comments:

1. We do not have the information on how many households were reached and how many members agreed to participate.

2. On page 7 (currently page 6, paragraph 1, line 3-7 in the categorization of the ‘composite indicator’ IADLs were included with ADLs. The measure includes both ADLs and IADLs.

3. In the Discussion part of the paper (page 10, line 2) explanation on age was added from the paper Jylha M. on “What is self-rated health and why does it predict mortality” in Social Science and Medicine, 2009.

4. The sentence “Though this reliability…on page 12, line 4-7” was dropped.

Minor comments:

1. The whole distribution of SAH was shown in page 7, paragraph 1, line 6-8.

2. On page 3 the reference to Johnson & Wolinsky was changed to number 22.

3. The discussion on living condition on page 4, lines 19-22 was deleted.

Quality of written English: Edited.
Response to reviewer 2:

Major compulsory revisions:

The introduction was rewritten. The cross-country comparison and about the ageing of the population was deleted. The results of previous studies (Singh-Manoux et al, 2007 in Journal of Epidemiology and Community Health, Jylha in Social Science & Medicine, 2009 and Huisman & Deeg in Social science & Medicine, 2010) were mentioned in the introduction part.

The literature review was done to check the variables which were used to assess the self-assessed health. The common variables which were used in the studies conducted in developed countries and also in Thailand were used in this paper. One new variable ‘residence’ was added in the model. But it did not change the explanatory power of the model. We have found that other variables like number of offspring, household possession, musculoskeletal symptoms or recent admission. But the current dataset did not contain those variables.

The explanation of proportion of variance of self-assessed health was given in the text, page -10, paragraph-3, line 1-4.

Minor essential revisions:

The confidence interval (CI) was included in the table 2, page-16.

The reference of Ann Bowling was given a number 35 in page 10, paragraph- 2, line 5.

In the fourth paragraph of discussion the reference was used from Dawd & Zajacova, Singh-Manoux et al., Huisman et al. was mentioned.

Discretionary revisions:

Table 1 and table 2 were merged. Page 15.

In the discussion part the findings from Dowd & Zajacova, Singh-Manoux et al., and Huisman et al in International Journal of Epidemiology 2007, 36 was added in page 10, paragraph 2, line 1-2.

Quality of written English: The paper was edited.

Response to reviewer 3

Introduction: The Universal Coverage Scheme was mentioned in the page 4, paragraph 1, line 3-4.

Methods/data: The study did the analysis on weighted data. It was mentioned in page 6 paragraph 3, line 1. The results are representative to the Thai elderly.

Discussion: There are studies which used NSO elderly survey. For example, “Population ageing and the well-being of older persons in Thailand: Past trends, current situation and future challenges” by John Knodel and Napaporn Chayovan, 2008. That paper did not examine the determinants of self-assessed health of older people. But some of the descriptive and bivariate findings are
similar with our study.

Quality of written English: The paper was edited.