Author’s response to reviews

Title: Discomfort and agitation in older adults with dementia

Authors:

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Author’s response to reviews: see over
Québec, August 15th 2007

Dr Liz Hoffman
Assistant Editor
BMC-series Journals
BioMed Central

Dear Dr Hoffman,

As requested in your message of June 15th 2007, we are submitting a revised version of our manuscript (5233319471167623) for publication in BMC Geriatrics. In this letter, we provide a point-by-point response to the concerns of the referees.

Dr Buffum:

- **Clarify the data collection period**
  - We now mention in both the abstract (p. 2) and methods section (p. 11) that RN’s were given two weeks to complete and return all scales (i.e., the Cohen-Mansfield Agitation Inventory was completed at the end of the two weeks and all other scales were answered during this period). Note that details concerning the data collection period are in the “procedure” section rather than the “participants” section.

- **Word usage and grammar**
  - All requested revisions have been done.

- **Re-state the hypotheses**
  - The hypotheses are re-stated through a summary of the main findings at the beginning of the discussion (p. 14)

- **Clinical implications and next research steps**
  - Clinical implications are indicated on page 15, 1st paragraph: “Given our results (…)”. Suggestions for future research are indicated on page 16, 2nd paragraph: “It is unclear (…)” and “Future studies, therefore (…)”.

Dr Goldsmith

- **A method or search strategy is needed for the literature review**
  - We now briefly describe the search strategy for empirical studies on the relationship between discomfort and agitation. (page 6, 2nd paragraph).

- **Word usage and grammar**
  - Requested revisions have been done.

- **Tables 3, 4, and 5 could be combined into one table**
  - This has been done.

- **Power to detect significant correlations**
We performed post hoc power analyses and report these in the results section (pp. 12-13). The findings have implications for the results regarding aggressive behavior and we refer to this in the abstract (p.3, 1st paragraph) and the discussion (p. 14, 1st paragraph).

- **Justification of the sample size**
  - As indicated in the revised paper (pp. 7-8), the sample size is based on a power analysis conducted prior to the study.

- **Reliability and validity of the measures**
  - Details about the reliability and validity on the various measures are now provided (pp. 8-11). As indicated, the SMAF, the CMAI and the DS-DAT have all been found to be adequate when used by nurses. To our knowledge, this has not been examined for the FAST. However, the majority of residents assessed in our study were rated on the FAST as being in the three most severe stages of dementia (5-7) which is consistent with the fact that they were receiving professional nursing care in an institutional setting. This suggests that ratings on the FAST were appropriate.

We hope that this response and the revised version of the manuscript are satisfactory. We look forward to a decision regarding publication in *BMC Geriatrics*.

Sincerely,

Philippe Landreville, Ph.D.