Reviewer's report

Title: Development and testing of a self administered version of the Freezing of Gait Questionnaire

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Reviewer: Simon J.G. Lewis

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Development and testing of a self administered version of the Freezing of Gait Questionnaire


Nilsson and colleagues present a well constructed manuscript exploring an area of growing clinical importance. The paper recognises the paroxysmal nature of freezing and the need to develop self assessment strategies to quantify the most common freezing phenomenon, namely Freezing of Gait (FOG). The authors report the methodical development of a self-report FOG questionnaire (FOGQsa), which they have subsequently validated against the existing clinician interview approach. Furthermore, they also note the ability of this instrument to detect risk of falling and fear of falling amongst a mixed cohort of disease severities.

Major Compulsory Revisions

1. In the Results section (paragraph 2) the authors report that 19% of cases had neither FOG or gait difficulty, scoring zero on the FOGQsa. Furthermore, no patient scored a maximum of 24. Could the authors comment on the distribution of scores across the range of FOGQsa to assure the reader that sufficient cases existed across severities for validation with the existing FOGQ. This could perhaps be addressed in quartile ranges?

Minor Essential Revisions

1. To aid the reader in the Development of the FOGQsa section, the authors should include a sentence explaining how FOG was demonstrated to the clinical sample in addition to reference 19.

2. It would be helpful in an Appendix to have the explanatory paragraph used to help patients understand the concept of FOG and as well as the final text of the questions used (in English).

Discretionary Revisions

1. In the Discussion section the authors might like to include a brief sentence identifying the previous literature regarding the difficulties in estimating time that have previously been identified in PD, which might help explain the difficulties that were commented on by patients from the clinical sample.
2. I note that reference 29 relates to a presentation to be given later this year by the authors relating to this work, which makes this reference a little circular in nature.

3. The authors could consider commenting on the limitations of any questionnaire unless validated against some form of home ambulatory recording, perhaps using accelerometer technology (e.g. Moore et al Journal of Neuroscience Methods 2008).

4. Although the existing FOGQ was developed for clinical interview the authors could consider whether this instrument could be assessed in its current form as a self report tool.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

I declare that I have no competing interests