Reviewer’s report

Title: Screening for Distress, the 6th Vital Sign: Common Problems in Cancer Outpatients Over One Year in Usual Care: Associations with Marital Status, Sex, and Age

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Reviewer: Gary Rodin

Reviewer’s report:

This paper is a report of findings from distress screening over 12 months in a usual-care mixed sample of 1707 cancer outpatients. The sample such diverse cancer types as gynecological (n=110), prostate (n=230) GI (n=329), melanoma (n=133), head and neck (n=75), thyroid (n=25), and testicular (n=133), lymphoma (n=39), leukemia (n=33), lung (n=31), brain (n=25). Their observations include the finding that younger single women reported more practical and psychosocial problems and that young single men and women reported the most past and future use of services.

The authors have previously reported cross-sectional findings from this data and focus here on the longitudinal data. The size of the sample is a strength of the present study. However, conclusions that from this study regarding persistence of distress and practical problems in relations to age, gender and marital status are difficult to draw because the sample includes some cancers that are gendered, some which are associated with enormous practical problems related to the cancer and its treatment and all with widely differing clinical courses. The longitudinal course of patients in remission or who have had curative treatment appears to be grouped here with that of patients with progressive and terminal disease. In that regard, 7.8% had died by the time of the 3-month follow-up and 15.3% by the 6 month follow-up.

It has not been possible in this study to take into account the stage and course of disease and the nature of treatments received during the time period of the study. Further, the authors suggest that the higher use of psychosocial services in young people reflects greater need but have not considered the possibility – which has been reported –that lesser usage of services by older patients may reflect greater barriers to access in the older population than those in younger patients.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

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.