Reviewer's report

Title: A Grey Literature Review of Special Events for Promoting Cancer Screenings

Version: 1 Date: 4 March 2014

Reviewer: Joannie Lortet-Tieulent

Reviewer's report:

- Major Compulsory Revisions

The author must respond to these before a decision on publication can be reached. For example, additional necessary experiments or controls, statistical mistakes, errors in interpretation.

ABSTRACT

1. Abstract/Results “Mammogram screening rates ranged from 6.8% to 60% and Pap tests from 52% to 70%.” => 6.8% of who? The women present at the fair? The women that signed-up for a mammogram during the fair? The target in the general population?

I assume this is the proportion of people screened AFTER attending the special event (it is not stated). Did the % exclude the people attending the special event that were already screened? Please clarify. (also in the body of the text).

2. Abstract/Conclusions => why is grey literature more important for screening than for any other scientific or health topic? Do you think that screening special events are not appropriately covered by “standard” literature? I.e., what is the added value of your work?

TEXT

3. Background: “However, there is still a disproportionate number of uninsured or underinsured individuals that do not have access to regular cancer screenings and suffer higher rates of mortality as a result [4].” Insurance status is not the only reason why people don’t get screened. Available facilities, being able to spend some time to go to the doctor, not being afraid of the screening outcome, personal believes about the disease, education level, socio-economic level… can also explain why some people don’t comply with screening guidelines. The authors later reported that in their previous literature review “The most frequent activities mapped onto Community Guide strategies were reducing structural barriers to screening, one-on-one or group education, and provision of cancer educational materials.” It means that those
are also important factors.

4. General comment for background: data about cancer incidence and death for breast, colon and cervical cancer are presented. But the authors fail to depict the situation about screening for those 3 cancers. What are the guidelines? What is the % of people screened for each cancer site? What are the factors for not getting screened (different by cancer site, as 2 are female cancers, one is present in both sexes)? What is done by the government to promote screening? In essence, why is there a need to organize special events to encourage screening?

Methods

5. “the searched aimed to identify literature that addressed at least one of two primary outcomes of special events including: screening determinants (e.g., increased awareness, knowledge, intentions to get screened, and referrals for screening) and completed cancer screenings.” Do you talk about your present article (grey literature) or your previous literature review?

The constant mix between your grey literature review and your previous literature review makes it difficult to understand. The fact that I could not read the previous literature review made it even more difficult to understand if you were referring to previous or current work.

So, your previous literature review dealt with special event that talked about screening AND hosted screenings, while you grey literature deals with special events that deal with screening, whether or not they hosted mammograms, pap tests, FOBT. Did I get that right?

Results

6. Description of dissertation study

I liked the story reporting the play. However, I am confused about the purpose of the article “The purpose of this study was to conduct a grey literature component of special events that promote …. Is the goal of your article to talk about the special event in themselves, or to talk about the theses / dissertations / conferences that report the events?

7. Types of studies presented at conferences

In the 8,136 abstracts and proceedings of the conferences, did you exclude the ones that were later published in scientific journals and therefore captured by your previous literature review? Were you able to come up with your own proportion of unpublished conference abstracts?

- Minor Essential Revisions

The author can be trusted to make these. For example, missing labels on figures, the wrong use of a term, spelling mistakes.

ABSTRACT

8. The abstract starts with the “background” section, reporting that “health fairs,
screening days or cultural festivals are employed often for community education about cancer screening.” So it is not consistent with the strategy presented in the “Methods” section, to look for “dissertations/theses and conference abstracts.” Reading the “Background”, I would expect you to look at cultural festival programs for example, not thesis topics.

**TEXT**

9. Background: “Due to the limited peer-reviewed literature on special events that aim to increase cancer screenings,” How many special events did the authors identify thanks to their previous review? I could not access reference #[6]. I even used ProQuest, which is cited in the article.

10. “…by examining special event interventions that were performed but have not yet been published in the peer-reviewed literature.” The authors earlier wrote that “Fewer than half of trials presented at conferences continue to full publication”. So, not all material will eventually be published.

11. Shorten Stage II and Stage III

**Results**

12. I am curious about the outcome of your search that focused on screening for other cancer sites (melanoma, lung cancer as part of occupational screening). How many documents did you find on special events targeting other cancer sites?

13. Table 2 is not essential => provide as supplement material.

14. Shorten Data obtained from the Three-Stage Process

15. “The number of participants at the events ranged widely from 880 [14] to 8,026 [19] per event or is it the cumulative number of participants in multiple displays of the same event (some events lasted up to 7 years)?

16. “Additional data that was collected included screening determinants such as knowledge and intention to be screened [16-17] and barriers to care [18].” Pre- or post-event?

17. “One event of health parties detailed costs at $130 per event, while another of health forums had costs of $3000-$4,000 per event.” Do you have the cost per participant?

**Discussion**

18. “In addition, they may also reach a segment of the population that may not utilize medical centers or health clinics in high frequency”. I don’t think “high frequency” is the appropriate term. Maybe “easily have access to medical centers”. If you are never sick, you don’t need to go to a medical center, but you can still go once is enough for a screening. It is not a matter of frequency.

- Discretionary Revisions
These are recommendations for improvement which the author can choose to ignore. For example clarifications, data that would be useful but not essential.

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

**Quality of written English:** Acceptable

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

I have been working for the American Cancer Society, since July 2013, in the Surveillance and Health Services Research program. This non-profit does promote cancer screening.