Reviewer's report

Title: Does knowledge of cancer diagnosis affect quality of life? A methodological challenge

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Reviewer: Monika Janda

Reviewer's report:

General
This is an interesting paper with an ambitious aim involving 129 lung cancer patients mostly from a socially deprived area. The authors have published three other manuscripts on the same patient group and concluded previously that quality of life was a significant predictor of survival in this patient group, that a significant number of patients was affected by anxiety and depression and that the inclusion of measurements of patients quality of life could contribute to better understanding of patients cancer treatment experience. In the present manuscript the authors follow the question if the pretreatment quality of life score is influenced by patients knowledge of the cancer diagnosis.

The manuscript describes a study of semiprospective design where patients are interviewed before they "officially" received their diagnosis. However, as has been criticised before one can question if patients (especially those with severe symptoms and/or a reduced performance status) are really blind to their diagnosis or if patients are actually quite knowledgable about their potential diagnosis. In the present sample it seems unlikely that for example the 29 patients with a Performance status of 2 or 3 did not have serious questions upon their health. Similarly the 39 patients with significant weight loss are likely to have some thoughts about the reasons for this physical deterioration. Only 96 patients of the sample were alive three months later, with another 6 patients too sick to be reinterviewed at this time. 48 patients of the sample were administered best supportive care only.

Discretionary Revisions (which the author can choose to ignore)
Did the authors consider alternative statistical methods, such as a multivariate logistic regression analysis to assess if global quality of life was associated with pretreatment knowledge while adjusting for the other variables in the model? One would suspect that this could alter the results quite significantly.

Did the authors assess smoking status? If so, this would be very interesting to include into the multivariate model.

Minor Compulsory Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

What next?: Accept after discretionary revisions

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

Statistical review: No

Declaration of competing interests: None.