Reviewer's report

Title: Satisfaction with care among patients with non-metastatic breast cancer: development and validation of the REPERES-60 questionnaire

Version: 1 Date: 16 April 2007

Reviewer: Chih-Hung H Chang

Reviewer's report:

General
This paper reports the development and validation of the REPERES-60 questionnaire to assess satisfaction with care among patients with non-metastatic breast cancer. However, the authors did not provide strong justification of the needs of developing such a new instrument. It is also not clear how the “different phases of treatment” issue has been incorporating into the item generation process. Although the manuscript seems to be written in a straightforward fashion, it would benefit greatly from some editorial assistance (e.g., spelling, grammar, tense, etc.) to make it more reader friendly. Some important data collection procedures seem to be missing in the “Method” section. Re-organizing some of the information presented might also be helpful.

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

Page 1:
[1] It would be helpful to describe a bit more on: 1) how the 45 new items were created; 2) how the patients were selected; 3) the demographic and clinical characteristics of the participants; 4) how the divergent validity and discriminant validity were tested.

Page 2:
[2] What are the 4 new dimensions and what does the REPERES-60 stand for?

Page 4:
[3] It would be helpful to summarize the development focus or results from some of the existing satisfaction instruments (references 10-17) and discuss why they do not address the issue of not incorporating “patient opinion in different phases of treatment for breast cancer”.

[4] Consider moving the “This study was conducted in ….” Paragraph to “Method” section.

Pages 5-6:
[5] How the new items were written and by whom?

Page 6:
[6] It is confusing, at least to this reviewer, that why there were 79 items derived from the original CSS-VF?

Page 7:
[7] The data collection procedures in three different time period would merit some clarifications. It is somewhat ambiguous at the present form (The first paragraph on page 7). What were the response rates?

Page 9:
[8] It is not clear why the “Varimax” (orthogonal) rotation was chosen as the dimensions were thought to be correlated.

Page 10:
[9] The use of the EORTC QLQ-C30 for examining the validity of the REPERES-60 seems problematic. Why the authors expected that the correlations between the two instruments should be low (r < .40).

[10] Why the authors expected those patients who were younger patients, with higher education, having problems of communicating, and with poorer health would have lower scores (less satisfaction). Any
literature or their own work to support this? Also how the “experienced problems of communicating in the announcement of the diagnosis” was determined?


Page 11:
[12] Had there any other clinical information been collected in addition to the basic demographics?

[13] Consider using abbreviated item contents in Table 2 (full content can be seen in the Appendix).

Page 13:
[14] The process to examine the reproducibility issue seems contradictory to what the authors pointed out (“Reproducibility was studied at dimensional level using the intra-class correlation coefficient…”).

[15] How the 12-factor solution was reached? Eigenvalues (not reported) or Scree plot (not shown)?

Page 14:
[16] What are the correlations between the derived factors?

Page 16:
[17] No data were reported in this paper to support the statement (… made it possible to reduce the time required to reach a finalized, validated version.).

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

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Discretionary Revisions (which the author can choose to ignore)

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What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of limited interest

Quality of written English: Not suitable for publication unless extensively edited

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.