Reviewer's report

Title: Participation of older newly-diagnosed cancer patients in an observational prospective pilot study: an example of recruitment and retention

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Reviewer: Madelon Pijls-Johannesma

Reviewer's report:

Major Compulsory Revisions:
- Statistical analysis:
  Why a subgroup based on median age? It would be clinically more relevant to compare groups on functional status, tumor type and with different co-morbidities. This way you may be able to identify sub-groups who may be suitable or not to include in studies with a high burden.

- Table 3: Type of cancer is listed in table 3. Please also include the number of included patients or number of patients alive at study end per tumor site in the table. Information on 19 lung cancer patients who completed the questionnaire is meaningless, but knowing that 19 out of 27 (of which 8 died) completed the study, means that the compliance rate of the lung cancer patients was 100%. Apparently lung cancer patients are more compliant than breast cancer patients (66%). So you may conclude that patients with poorer prognosis and a worse condition are more willing to participate in studies than patients with a better prognosis. Discus this in the discussion.

- List of recommendations (page 21):
  Although this list gives meaningful information, some more clinically relevant information is missing on patient selection to be asked in study participation.

Minor Essential Revisions

Introduction:
- First alinea: the concept frailty is introduced, however no clarification is given: please explain this concept.

- Second alinea: Other studies have reported that recruiting older patients......: regarding the subject of this study, you should give a definition of what you mean with 'older patients'. It could be that no general definition can be found on older patients, but you could than which cut-off point previous studies have been used and subsequently calculate a mean age.

- Second alinea: authors mentioned that there patients may also asked for participating in a clinical trial as well as in an observational study. For older patients this may increase the burden and may affect response and retention rates. This could be a very relevant finding for clinical practice, however authors didn’t came back on this.
- Last alinea (page 6): The aim of this study is not clearly described here (more clearly in abstract). Again the concept or frailty is mentioned as being useful to identify patients at risk of adverse outcomes of cancer treatment. Again, unfortunate authors didn’t come back on this.

Patients and Methods:
- First alinea, page 6; why age 65? And why only breast, colorectal, lung and hematological malignancies?

- Study description:
I suggest to start first with a description of the measurements (as in section data collection) and clearly write down which questionnaire is measuring what. It is clear for me that anxiety and depression was measured with the HADS, but which questionnaire was use for measuring the QoL?

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**
none declared