Author's response to reviews

Title: Intensity and timing of physical activity in relation to postmenopausal breast cancer risk: the prospective NIH-AARP Diet and Health Study

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Author's response to reviews: see over
August 24, 2009

Dear Biomed Central Editorial Team,

Re: MS5937444242848903 - Intensity and timing of physical activity in relation to postmenopausal breast cancer risk: the prospective NIH-AARP Diet and Health Study

We thank the reviewers for their comments and aim to address the issues raised with the changes indicated below.

Reviewer 1 commented on the potential for misclassification of physical activity intensity as well as duration due to the categorization used in the physical activity questionnaire. To ensure that we fully addressed these limitations, we added (page 17): “However, we could not evaluate heterogeneity in the association of moderate versus vigorous activity with breast cancer risk within our study in order to compare with prior studies or to determine whether moderate activity is sufficient for reducing postmenopausal breast cancer risk” and (page 21) “In addition, while providing categories of physical activity duration (<1, 1-3, 4-7, or >7 hours per week) eases the recall burden of participants, such categorization may also permit misclassification if differences in risk exist for more subtle distinctions in the amount of time spent active.” The issue of study design is also very important, and we edited the Conclusion to reflect this consideration (page 21): “Although controlled trials or intervention studies are the ideal study designs for disentangling the “dose” of physical activity that may influence breast cancer risk, the cost and duration of such studies for researching the association of physical activity intensity and timing with primary breast cancer limits their feasibility [53].”

Reviewer 2 suggested that we comment on the implications of the low response rate to the baseline questionnaire. We agree that this is a limitation of our study, particularly with respect to the generalizability of our results, accordingly, we added (page 19): “One limitation of our study, however, is that the generalizability of our results may be limited due to the relatively low response proportion to our initial postal questionnaire.” The reviewer’s recommendation to describe the categorization of historical age groups; the rationale for these groups is suggested on page 9: “...during each of four separate life periods (age 15-18 years, 19-29 years, 35-39 years, and in the past 10 years).” We also amended Tables 1a&b as per the reviewer’s request.

We hope this updated version meets with your approval.

Sincerely,

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