Author's response to reviews

Title: Prevalence of dementia and Alzheimer’s disease in elders of nursing homes and a senior center of Durango City, Mexico.

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Version: 2 Date: 2 Dec 2003

PDF covering letter


Dear Editor,

Please find a new version of our manuscript attached, that has been modified according to the reviewers’ comments. In addition, please find below our response to each of the reviewers’ comments on a point-by-point basis.

We hope the new version of the manuscript may have more success for publication in BMC Psychiatry.

Yours truly,

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RESPONSE TO THE REVIEWERS’ COMMENTS.

Reviewer: Manabu Ikeda.

1. As written in the Methods section (Socio-demographic data, mini mental state examination, and
neuropsychiatric evaluation) we clarify that we have used a MMSE cut off point of 24 or less in order to avoid false negative results. This cut off point is higher than that used in other studies, and it yields a higher sensitivity than lower cut off points. Therefore, the cut off point used in this study should be considered as a stronghold rather than a limitation of the study.

2. The study population is defined in the Methods section, we studied nursing home residents and senior center attendees but not elders in the general population. Certainly, there are demented elders in the general population, but they were not our study population. We described what we found only in nursing home and senior center populations other than a general elderly population. We would like to clarify that there are no admission policies in the nursing homes and senior centers that reject demented elders. Therefore, there is not any bias by admission policy in nursing homes. This information was added to the Discussion section.

Reviewer: Konstantinos Fountoulakis.

1. The title was changed in order to make it clearer.
2. Additional information was included in the Background section. Data from a number of epidemiological studies, especially European ones, were added. Indeed, the number of references increased from 33 to 41.
3. The meaning of "senior center" was added.
4. The numbers concerning the study population was mentioned earlier (at the very beginning of the Methods section) and made clearer.
5. An appendix including the method of data collection was added.
6. The MMSE has not been validated in Mexico. Nevertheless, we used the validated Spanish version of the MMSE. This information was added to the Methods section.
7. Information about the laboratory tests used was added to the Methods section.
8. The sentence including "evidence of cerebrovascular disease" was deleted in order to avoid confusion.
9. The writing was improved and reviewed by an English expert.
10. With respect to the statistical analysis, we did not use MANCOVA because we did not search for differences of quantitative variables (age) as a factor. The statistician recommended to use odd ratios because we measured association. This argument is remarked in the Statistical analysis section. In addition, one reviewer stated that we have used the appropriated statistical methods.
11. Indeed, there was a greater number of females than males in our study population. The number of males was too small to be included in a cross-tabulation presentation for comparison purposes with females.
12. We found few smokers. Certainly, the frequency of smoking was higher in males than females. This information was added to the text.
13. A comment about the frequency of never married elders was added in the Discussion section.
14. Concerning the correlation of unemployment and diagnosis. It is not clear why unemployment relates to dementia, however, associated factors as illnesses might be a contribution. This information was added to the discussion section.
15. Indeed, low education may be a confounding variable for journeymen. We added information about it in the discussion section.
16. The fact that our results agree with previous work by other groups validates our study.

Reviewer: Alex Gray.

We have rewritten the Statistical Analysis section. We clarified that we used logistic regression to calculate crude odd ratio, and because of the sample size we did not perform multivariate analysis for age and gender adjustment. In addition, we added information in the Discussion section about the limitation of the possibilities to find a strong evidence of association.