Author's response to reviews

Title: Training in Dual Diagnosis Interventions (The COMO Study): A Randomised Controlled Trial

Authors:

Elizabeth C Hughes (lhughes@lincoln.ac.uk)
Shamil Wanigaratne (shamil.wanigaratne@slam.nhs.uk)
Kevin Gournay (keyingournay@aol.com)
Sonia Johnson (s.johnson@ucl.ac.uk)
Graham Thornicroft (g.thornicroft@iop.kcl.ac.uk)
Emily Finch (emily.finch@slam.nhs.uk)
Jane Marshall (jane.marshall@slam.nhs.uk)
Neil Smith (n.smith@iop.kcl.ac.uk)

Version: 4 Date: 18 September 2007

Author's response to reviews: see over
Cover Letter Regarding Reviewers Comments

Thank you for the further comments received by peer review. The paper has now been reviewed by the authors and we have made some overall changes to how it has been written in order to make it read more clearly.

This includes clarifying that this paper is reporting an aspect of a broader study, and editing the discussion and conclusions.

I have amended the discrepancies with the consort diagram, and ensured that the two arms of the trial are consistently labelled.

I have amended the abstract as per Carl Lombards comments:

The decimal places are all to 2 places.

The sample size has been adjusted to 55 to take account 20% of caseloads of 20 will be 4.

Sample size has been added to table 1

Fiona Lobban’s comments:

I have moved numbers of people recruited etc to results

In terms of the scales developed for the study, 3 dual diagnosis workers completed these questionnaires and their scores were collated. They all scored almost 100% on all three. The point that was being made was that people with a good knowledge of dual diagnosis produced high scores. I do concede that this is not scientifically rigorous and have decided to delete this as it doesn’t add anything to the paper. Instead I have written that the scales were reviewed and approved by 3 independent dual diagnosis experts.

In regard to the Cronbach alpha for self-efficacy scale I have reported the range of inter-item correlations which demonstrate that there is some variation in responses but as the scale measures confidence in skills in addressing substance use for different drugs and alcohol it would be expected that there would be a high degree of correlation in responses.

I have clarified the 80% query in results

I have revisited attendance at training to clarify that a large proportion of those who attended training attended 4.5 out of 5 days, and have adjusted this in the text to clarify why it was appropriate to include all in analysis

As previously noted- consort diagram has been amended

Have addressed the issue of contamination in discussion in terms of offering a possible alternative design (whole team training)
Minor revisions pointed out by both reviewers have been addressed.