Author's response to reviews

Title: Factors associated with dropout from treatment for Eating Disorders: a comprehensive review of literature.

Authors:

Secondo Fassino Prof. (secondo.fassino@unito.it)
Andrea Pierò Dr. (andrea.piero@unito.it)
Elena Tomba Dr. (elena.tomba@unibo.it)
Giovanni Abbate Daga Dr. (giovanni.abbatedaga@unito.it)

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Author's response to reviews:

Dear Editors and Reviewers of our manuscript,

We would like to thank you for your many helpful comments and suggestions.

Referee 1: Prof. Michael Strober

1. As suggested, we have included two studies focusing on adolescent subjects (Lock et al., 2006; Hoste et al., 2007). Two other papers (Godart et al., 2005; Pereira et al., 2006) were excluded because they were not compatible with the inclusion/exclusion criteria previously described. Moreover, as suggested, we included in the Discussion section more details on the role of aging in dropout (page 18).

2. We have shown in the Results section the lack of data regarding predictors within major diagnostic categories (page 14).

3-4. As suggested, we have differentiated between staff-initiated and patient-initiated termination of treatment and between early and late dropouts in the text and tables (Table I; pages 7; 10-11) and we have included more detail about studies that considered different types of dropout (7; 10-11). This is also mentioned in the Discussion section (pages 18-19), regarding both the differentiation between administrative and patient initiated termination and the timing of interruption of treatment (early, middle, late).

5. In reference to Table 3, we think it useful for readers to have a list of acronyms of the questionnaires cited in the studies. Since it is possible to list these acronyms in another way or place, we have left this decision to the editors.

6. Regarding the language used in this manuscript, the text has now been edited by a professional English language editor.

Referee 2: Dr. Stein Frostad

1. We believe that the search method we used was adequate in regard to both
the international standards and the aims of this study. In the section on inclusion/exclusion criteria, we mentioned including “studies with a specific aim of analyzing the dropout phenomenon (i.e. trials that only described the number of dropouts and their motivations were not included)”, because we wished to include only those studies that assessed the dropout phenomenon, that paid attention to predictors and utilized a standard definition of early termination of treatment. Inclusion of papers not tailored to this aim lead to confusing and unsuitable results.

2. As suggested, we paid more attention to this topic. On page 11, we explained that the studies included in this review often did not report how patients were prepared for treatment and or about motivational therapy. Regarding care organization, we described kinds of treatment. However, as this reviewer wrote, it is difficult to describe in detail the care organization because most studies did not describe these features.

3. We think that this is not a limitation but a methodological choice.

4. Regarding the language used in this manuscript, the text has now been edited by a professional English language editor.

Best regards