Reviewer’s report

Title: The psychometric properties of three self-report screening instruments for identifying frail older people in the community

Version: 1 Date: 12 November 2009

Reviewer: Arnold Mitnitski

Reviewer’s report:

In the manuscript 'The psychometric properties of three self-report screening instruments for identifying frail older people in the community', Metzelthin and coauthors evaluated the psychometric properties of three instruments for screening of frail old adults. These instruments are: the Groningen Frailty Indicator (GFI), the Tilburg Frailty Indicator (TFI) and the Sherbrooke Postal Questionnaire (SPQ). Internal consistency, agreement between instruments and construct validity were evaluated and compared. By assessing 687 community-dwellers of 70 years and older, 77% of whom responded to the questionnaire the authors found that prevalence of frailty ranged from 40 to about 60% depending on the instrument. They concluded that GFI and TFI showed high internal consistency and construct validity to the SPQ but mentioned that it is impossible to conclude whether the GFI or the TFI should be preferred; data on the predictive values of both instruments are needed.

Major compulsory revisions

1. Why it is important to do this study? What are the problems with the other approaches to operationalize frailty? There are two major approaches to handle frailty: frailty phenotype (or Fried’s frailty) and the frailty index approach, see for example Rockwood & Mitnitski, J Ger Med Sci., 2007). It would be important to check any other new measure of frailty against these two.

2. One problem with suggested measures are that they identify from 40 to 60 people as frail while much smaller numbers are presented in the other papers. That should alert the authors. In addition, they found such big prevalence in community-dwelling people while much less prevalence was shown in more selected (not by their higher wellness) people. This makes me sceptical about the validity of the results presented in the manuscript.

3. I understand that the authors wanted to use a simple measure based on self reports. That is fine with the frailty index. It can be used (and has been used) in the self-reported setting. Perhaps the authors could consider this option if they chose to revise the manuscript.

4. Why the proportion of frail people decreases with age (Table 1)? The same with the number of frail people with high income (see also Table 3). This contradicts to all what is known about frailty however it is defined.
Minor Essential Revisions.

1. I don’t understand why they need additional file is in appendix –the BMC journals do not have space limitations.

2. Tables should not be called ‘figures’.

3. Reference to the paper just submitted is not appropriate (e.g. 18)

Level of interest: An article of limited interest

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:
I declare that I have no competing interests