Reviewer's report

Title: Testing for sexually transmitted infections in general practice - is it meeting need? A cross-sectional study in two contrasting English populations.

Version: 1 Date: 4 June 2010

Reviewer: Ted White

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My comments will be few; this is a very well-reasoned and articulated manuscripts.

Discretionary suggestions:

"…taken tests for chlamydia or HIV during the study time period" may be better reworded as "collected specimens for chlamydia or HIV testing."

P7, paragraph 2: This paragraph might be reworded to be clearer; the figures however are quite clear.

P7, last sentence: At first reading this sentence appears to report teen conception rates among women aged 15-44 years; it might be slightly reworded.

P8, first sentence: "increasing deprivation" might be worded as "greater deprivation".

P8, last sentence: "testing ratios" might be specific, as sex ratios.

Minor suggestions:

"List size data" is not entirely clear terminology; does this refer to aggregate data? Do data from the NPCD pertain to actual clinic patients, or do they reflect the number of tests (and number of positive test results) in the region? How are they related?

"Chlamydia positivity rates" are mentioned in the methods but are not mentioned in the results. In addition, "rate" generally refers to events per unit of person-time; it seems as though the intention might be to compare positive test prevalence.

It is not clear whether the sex and age of each patient tested were available. This may reflect the lack of clarity of the term list size data. From where were sex and age data (by individual or in the aggregate) obtained?

The ratio between male and female patients at GUM clinics vs private practices may reflect the mission of GUMs to serve gay and bisexual men. I doubt that data are available to assess how much differences in sex ratios may reflect this, but it might be recognized as a limitation. Gay men may also be tested for HIV in multiple anatomic sites—it's possible that this would be reflected in the number of
tests performed on males at GUMs.

Also in regard to the differences in sex ratio, the method of chlamydia testing used for male patients may differ between clinic types (and locations). If for example, urethral testing for chlamydia at GUMs is accomplished using a urine NAAT, but physicians in private practice tend to offer testing by culture of urethral swab, fewer male patients in the latter may be offered testing or accept it.

P7, paragraph 3: Were NCPD data analyzable by age category, by sex? If so, this may be informative.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests.