Author's response to reviews

Title: Measuring health-related quality of life in men with osteoporosis or osteoporotic fracture

Authors:

Marta Zwart (mzwart.girona.ics@gencat.cat)
Rafael Azagra (rafael.azagra@uab.cat)
Gloria Encabo (gencabo@vhebron.net)
Amada Aguye (amyaguye@telefonica.net)
Genís Roca (groca@movistar.es)
Sílvia Güell (24965sgp@comb.es)
Núria Puchol (39434npr@comb.cat)
Emili Gene (29833egt@comb.cat)
Francesc López-Expósito (flopeze@papps.org)
Sílvia Solà (ssolamun@yahoo.es)
Sergio Ortiz (sergibdv@hotmail.com)
MPilar Sancho (sanchomp@gmail.com)
Liz Abado (liarcv97@hotmail.com)
Milagros Iglesias (milaiglesias@camfic.org)
Pere Torán (ptoran.bnm.ics@gencat.cat)
Adolf Diez-Perez (ADiez@imas.imim.es)

Version: 4 Date: 10 September 2011

Author's response to reviews: see over
Dear Natalie Pafitis,

Many thanks to look our manuscript Measuring health-related quality of life in men with osteoporosis or osteoporotic fracture and your review.

I consider that your comments have been helpful in order to improve the manage of this paper. I really appreciate the report and the language suggestions. I have done the changes inside de doc and uploaded it in BioMed Central website.

Looking forward to hearing from you and do not hesitate to contact me if you need any further details regarding any of these points.

Kind Regards,

Dr Marta Zwart

Ps: Please, let me know that you have received this mail properly.
Reviewer's report
Title: Measuring health-related quality of life in men with osteoporosis or osteoporotic fracture
Version: 2 Date: 29 August 2011
Reviewer: Charlie Goldsmith

Reviewer's report:
In general, this paper is reasonably well done; however, there are several suggestions that could improve the paper further.

1. P(age) 1, Addresses, l(ine) 4, 11, 12, 14, 16, 17. There is use of a term [s/n] which is not clear. Does this represent the postal code, and if so, why is it needed? It is not used with all numbers that appear to be postal codes.

   The term [s/n] does not represent the postal code, it is the Spanish abbreviation of unnumbered. We have changed it in the paper in order to avoid the mistranslation.

2. P 2, p(aragraph) 1, l 2 and 3. Suggest replacing [The studies had …] by [Studies have …].

   The sentence has been changed as the reviewer indicates.

3. P 2, p 1, l 5. Suggest replacing [… little data is …] by [… few data are …]. Data is a plural word.

   The sentence has been changed as the reviewer indicates.


   The sentence has been changed as the reviewer indicates.


   The sentence has been changed as the reviewer indicates.

6. P 3, p 1, l 2. Suggest replacing [of … data] by [of important morbidity and mortality data].

   The sentence has been changed as the reviewer indicates.

7. P 3, p 2, l 1. Replace [our country reflects] by [Spain reflect].

   The sentence has been changed as the reviewer indicates.

8. P 3, p 3, l 1. Replace [is] by [are].

   The sentence has been changed as the reviewer indicates.

   The sentence has been changed as the reviewer indicates.

10. P 3, p 5. Provide a reference to these issues.


   The sentence has been changed as the reviewer indicates.


   The sentence has been changed as the reviewer indicates.

13. P 4, p 3, l 1. Insert a space and rewrite as [< 5.0 minutes and 12.3].

   The sentence has been changed as the reviewer indicates.

14. P 4, p 4, l 2. Rewrite as [few data are available on the Spanish male population.]

   The sentence has been changed as the reviewer indicates.

15. P 4, p 5, l 3. Rewrite as [> 70].

   The sentence has been changed as the reviewer indicates.


   The sentence has been changed as the reviewer indicates.

17. P 4, p 6, l 9. Provide some references for [being advised.].


18. P 5, p 1, l 1. Since [or] logically includes [and], drop [and/]. Also P 5, p 8, l 3. Also P 6, p 1, l 3.

   The sentence has been changed as the reviewer indicates.


   The sentence has been changed as the reviewer indicates.


21. P 5, p 6, l 1. Is there a reference to base the standard deviation of 0.35 on, rather than just a statement? Also suggest replacing [the mean of the variable] by [the means of the variables].

22. P 5, p 6, l 2. Why is 0.15 considered to be a minimum clinically important difference? Do the authors agree that this is the minimum for Spain, or does it have wider agreement for the research community?

23. P 5, p 6, l 5. Rewrite as [5% and power of 95%]. Also why is power set so high, it normally is put as 80%? Is there a reference as to why this is needed?

The standard deviation of the variable is an important factor. I have done the calculation with 0.35 because it is the greater I have found in the articles I have read. After choosing this standard deviation I have considered the worst situation and therefore the power 95%, the 0.15 difference and 5% significance have been chosen.

24. P 5, p 8, l 6. To make the text gender neutral, suggest rewriting as [... gives consent on behalf of the subject.].

The sentence has been changed as the reviewer indicates.

25. P 6, p 1, l 1. Replace [randomization] by [sampling]. You are not doing a randomized trial but you are proposing to randomly sample 140 subjects with and 140 without fractures from physician practices and measure QoL in them.

The sentence has been changed as the reviewer indicates.


The sentence has been changed as the reviewer indicates.

27. P 6, p 5, l 4. Make the 2 a superscript to read as [kg/m²].

The sentence has been changed as the reviewer indicates.


The sentence has been changed as the reviewer indicates.

29. P 7, p 1, l 5. Rewrite as [# 5]. Insert a space.

The sentence has been changed as the reviewer indicates.

30. P 7, p 2, l 5. This reviewer could not verify these recommendations. The website at [www.iscd.org] comes up fine; however, the path to the
recommendations is not clear. However, the website at P 7, p 3, l 4 worked fine.

The reference has been checked and changed by mistake: (Available at: http://www.iscd.org/Visitors/positions/OfficialPositionsText.cfm).

31. P 7, last p, l 3. Replace [K-W] by the name of the test [Kruskal-Wallis] and provide a reference to it as well as the Mann-Whitney test in the previous paragraph as they are not common the public health literature.

32. P 8, p 2 and 3. Provide reference to the Hosmer-Lemeshow test as it is not common in the public health literature.

The sentences have been changed as the reviewer indicates.


33. P 8, p 5, l 5. Suggest deleting [(three fold security)] as it is in fact more risky than having one person!

The sentence has been changed as the reviewer indicates.

34. P 8, p 7, l 4 to 6. Consider adding an agreement analysis of the two people who use the FRAX software before having a third person break the difference. This analysis could also be done with results from 3 people as well. It would add to the reliability of using the software, unless the people being used in your study already have published their agreement.

It is right and would be one way to do it. However, our experience with over 2300 surveys and with more than 5000 FRAX calculated is that there are frequent mistakes in the records between 2 and 5% and then always need further review. If they do 2 people need a third and if three people do need a fourth person.

35. P 8, p 8, l 2 to 4. Is there published evidence for this?


36. P 9, p 3, l 4. Over what time frame is [incidence] to be calculated?

The incidence of fracture is annual during 10-year period (retrospective). Each fracture is accompanied by the date of fracture which fits for years.

37. P 9, p 4. There is a need to add Y, N and AU to the list of short forms.

We have added the abbreviations to the list.

38. P 10 and 11. The R(ference)s that are in Spanish, should be placed in
square brackets and translated into English. Then on the last line of each R, there should be added [(in Spanish)]. This is true for R 3, 4, 7, 8, 10, 14, 19. A random sample of 10 Rs was checked for citation accuracy. Also, this reviewer likes to see issue numbers as they make it easier to find when searching for a R. Also the BMC journals like to see all author names and not truncated as in R 2, 9, 13, 16.,

The references have been checked and changed if mistake.

39. P 10, R 1, l 4. Insert [(5)] after [17].

The reference has been changed as the reviewer indicates.

40. P 10, R 2, l 1. The second author has initials [CC], and there are more authors. On l 3, insert [(5)] after [20].

The reference have been checked and changed as the reviewer indicates.

41. P 11, R 7, l 2. The last P number is [85] rather than [86].

The reference have been checked and changed as the reviewer indicates.

42. P 11, R 8, l 2. Insert [(6)] after [29].

The reference have been checked and changed as the reviewer indicates.

43. P 11, 8, l 1. The third author is [Agnus Dei D], and the author [Egger P] should be after [Caulin F], and there are more authors. On l 3, insert [(1)] after [7].

The reference have been checked and changed as the reviewer indicates.

44. P 11, R 11, l 3. Insert [(3)] after [20].

The reference have been checked and changed as the reviewer indicates.


The reference have been checked and changed as the reviewer indicates.

46. P 11, R 18, l 2. The second listed author has in initials [P] rather than [MP].

The reference have been checked and changed as the reviewer indicates.
47. P 11, R 19, l 1. The following authors have more to their names: [Encabo Dura G, Casado Butgos E, Aguye Batista A]. On l 3, rewrite as [2011;136(14):613-9. (In Spanish)]. The title should be in square brackets.

   The reference have been checked and changed as the reviewer indicates.

48. P 18, p 1, l 2. Delete [and/]. Also P 18, p 2, l 3.

   The reference have been checked and changed as the reviewer indicates.

49. P 18, p 4, l 6/ Delete [in order] in front of [to] as the words are redundant in English.

   The sentence has been changed as the reviewer indicates.

50. P 18, p 6, l 4. Replace [Ethic] by [Ethics]

   The sentence has been changed as the reviewer indicates.
Reviewer's report
Title: Measuring health-related quality of life in men with osteoporosis or osteoporotic fracture
Version: 2 Date: 7 August 2011
Reviewer: Jonathan Adachi

Reviewer's report:
Very important study.
Major compulsory revisions.
1. The only real concern that I have is that unless x-rays of the spine are done the investigators will not be able to determine whether a vertebral fracture has occurred. Many have reported that clinical vertebral fractures do reduce QoL, however it has also been recognized that subclinical fractures also result in reductions in QoL. The absence or presence of baseline vertebral fractures may also be very important in predicting future fractures and may be important in mortality risk assessment.

We realize that the fact that a history of fragility fracture reported by the patient may lead to bias, but we believe that because this factor is picked up by the doctor who attends assiduously to the participant, this bias is minimized, because he can contrast information during the questionnarie and through reports or radiographs (X-Ray). Do not forget either that a significant percentage of vertebral fractures are asymptomatic, and that we will not do an active search but presumably they also affect the quality of life of people participating in the study and discussion we also consider this as a limitation of the study. Anyway self-related fractures are an acceptable way to pick up this information.