Author's response to reviews

Title: Impact of the risk factors, activities and psychological disorders on the health status of patients with chronic obstructive pulmonary disease in China

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Author's response to reviews: see over
Dear Alejandro Videla

I have seen over your review.

**Reviewer's report**

**Title:** Impact of risk factors and activities on the health status of patients with chronic obstructive pulmonary disease in China.

**Version:** 2  **Date:** 31 July 2012

**Reviewer's report:**

1. The paper describes the results of a population-based cross-sectional survey of COPD patients in a rural area of China. The main objective of the study is what the authors consider vulnerability of COPD using a questionnaire of 50 items designed by the authors from several sources and the severity of COPD using a validated score (ADO, age dyspnea and obstruction). In the new version it seems more clear that the objective was to compare the results of the questionnaire which focus on the impact of COPD on self. Assessed health status, daily living activities, social activities and anxiety and a COPD severity questionnaire (which are usually described under the quality of life terminology). The authors still use vulnerability as an unclear concept.

In my view, the paper can be better described as a description of how the impact of disease on daily activities and anxiety is perceived by the population and is correlated to COPD severity as measured by the ADO index. I believe the use of the concept vulnerability is not appropriate in this particular study.

**The vulnerability had been revised.**

2. The abstract and the paper state that 10.5% of patients showed a realistic sense of their health status. This is not backed by any data, unless the authors are referring to the 10.5% of patients who felt healthy (table 2), and so the whole statement could be wrong. Please explain this assumption.
This sentence had been deleted from the abstract. The result (10.5%) was calculated out of investigation using the questionnaire.

3. As the translation and validation process have not been included in any publication, a short explanation of the process should be included.

4. It is not clear in the methods and results section (and the previous paper by Lou) how the 8217 COPD patients were identified and how the survey was performed. It seems that the authors know that there are 24641 COPD patients in their 1,14 million population, and they had a registry of all of them from which take a random sample. They also had complete medical information of 12875 patients that allowed them to exclude 3937 patients, and they screened 8938 in their houses (using a mail questionnaire? Home interviews?). From this screened population they tried they performed 7597 personal interviews (and home spirometry?). This amount of work is huge, and any reader should be interested in knowing how such a work was done.

Basic Public Health Service was conducted in Jiangsu province from 2006. All people would establish health records in 3 years according to requirement of Basic Public Health Service. Tongshan County, in the Xuzhou City region of Jiangsu province, has 28 townships and 1.14 million inhabitants. From a total of 1.10 million health records screened by the end of 2007, 24,641 cases of COPD were uncovered according to the COPD diagnosis and treatment guidelines criteria. Which township was assigned to investigation or not by simple randomization (a coin toss). Our study combined with Basic Public Health Service. All patients interviewed at homes, then, asked them to perform spirometry at health stations. This work carried out three months.

5. The methods section should include if the spirometry was performed at home at the same time of the interview, or if this data comes from medical records.

All patients were encouraged to perform spirometry at health stations.
6. Include biomass before all cooking mentions, as the problem is biomass as a cause of COPD


Minor Essential Revisions

1. Abstract “designed questionnaire.” the phrase lacks a verb

This sentence has been rewritten as: Correlation between the ADO index and the categories of collection using a newly designed questionnaire were calculated.

2. Background fourth paragraph “the objective of assessing the health…” rewrite the sentence as it seems to refer to the study objective and not to the general characteristics of the disease

This sentence has been rewritten as: the objectives of those studies assessing the health conditions of patients with COPD is to evaluate the relationship between vulnerability of patients with COPD and reducing life quality and COPD severity (measured using the ADO index)

3. Results. General characteristics. “response rate” instead of “utilization rate”

The utilization has been revised response.

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

Quality of written English: Needs some language corrections before being published

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

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

Additional editorial requirement:

"Please state in the manuscript that the flowchart appears in the first manuscript (MS: 1132755476070772), but you have reproduced it in this second article and please justify why, with the first manuscript cited."

The flowchart had been deleted.