Reviewer’s report

Title: Attitudes Of Developing World Physicians To Where Medical Research Is Performed And Reported

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Version: 1 Date: 24 Sep 2002

Reviewer: Dr John Ioannidis

Level of interest: A paper of considerable general medical or scientific interest

Advice on publication: Accept after discretionary revisions

This is a very interesting and pioneering study and it may set an example for other studies addressing important questions on how medical information is perceived by physicians in different medical settings in the developing world. I do have some concerns that you may want to consider, mostly in discussing and interpreting your findings.

Main concerns:

1. I believe that the relative influence and credibility of various information sources may vary depending on the medical problem/disease at hand. For example, if one compares the management of hyperthyroidism, breast cancer, acute myocardial infarction and a trypanosomiasis, there are considerable differences on where each disease occurs (differential incidence), and/or what is considered the gold standard for management in each area (the same for some diseases, very different for others).

2. Do you feel that the participating physicians understood the questions being made? A considerable percentage does not seem to have even access to medical library. I have asked graduating medical students at some of the best medical schools in developed countries and many have no clue about medical journals (even major ones). I am afraid this may be true also of many physicians. If the questions were not well understood, responses may have a lot of noise and may be driven simply from national feelings and patriotism. Other than "national pride", it is hard for me to explain the large difference as regards the distinction of local vs. regional journals. Reported trust to journals may not be reflecting the actual use of information.

3. Please comment on the fact that both for figure 1 and figure 2, the "little difference" zone is typically
by far the largest. This might suggest that indeed there is little difference or may mean that the scale and interview were not very sensitive.

4. Did you have any information on how many journals/papers these physicians actually read per month or per year? It may be precarious to state that these physicians use this or that kind of published evidence, if in fact a considerable proportion do not read any medical journals. Even in developed countries, the proportion who do not read any medical journals regularly in far from negligible. You should at least discuss that unfortunately even in the best settings, medical practice is not driven necessarily by peer-reviewed evidence.

5. In the same vein, do we know actually what journals these physicians read routinely? It would be interesting to document.

6. How is "region" perceived? For example, what is the region for Egypt? Could it be that there are simply no regional journals in some cases, and this is why the apparent ratings of trust to regional information is low?

7. "Research" is quite vague. Did you clarify that this was research on diseases that are pertinent in the area or any research regardless of pertinence?

Other specific comments:

8. Please justify the variable mode of sample selection in different countries. Was this done on purpose or did it escape attention (honestly)? It seems too convoluted to accept that it was all done according to plan.

9. How do you define "access to medical library"?

10. Please explain in more detail the Likert scale.

11. What was the overlap with the larger study (reference 9)? Please explain.

12. Please explain "pretesting" in page 5.

13. Page 13: the possibility for selection bias should not be downplayed.

14. The concluding paragraph seems to deviate considerably from the findings per se.

**Competing interests:**

None declared.