Reviewer’s report

Title: Tobacco intervention practices and training needs of U.S. Hispanic physicians: a cross-sectional study

Version: 1 Date: 11 July 2005

Reviewer: ashwin patkar

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General

1) The study is based upon an interesting premise and it appears considerable work was done to design and validate the instrument.
2) It touches upon several interesting ideas.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

1) The background section requires significant revision. The study implies Hispanic physicians face different challenges than other physicians when implementing smoking cessation practices. What are these differences? How do the attitudes of Hispanic physicians compare to physicians of other ethnicities? Similarly, the background section refers to “situations… particular to their patient population.” What situations? Some studies, including Nevid et al (1999) and Greisler et al (2002) support universal anti-smoking messages for different racial groups. While the study interesting, the background needs to explain why it is relevant.
2) Page 7, 1st paragraph refers to eight items on the instrument. These should be described or included in a table. These may be the eight interventions in Table 3, please clarify.
3) Numbers must be reported in a uniform way. Several percentages reported do not include a decimal place. Page 9, 1st paragraph, for example, states 24% of physicians routinely assisted patients. 24% of 45 physicians is 10.8, so either a decimal needs to be included or it must be explained why all 45 did not respond to all questions.
4) Page 8, last paragraph is unclear. The last sentence, “Forty percent…” describes the percentage of physicians who are aware their patients smoke and suffer the results of smoking roughly at the national average. If that is indeed the point of this sentence, this is not especially useful information.
5) Page 10, 1st paragraph does not include numbers of physicians who report such barriers, nor how the instrument recorded these data. Did respondents check boxes or write in responses? Also, the sentence, as written, is true whether or not one physician listed these barriers or all 45 did.
6) Page 10, 3rd paragraph, states respondents prefer to read journal articles about smoking cessation. The implications of this result should be discussed in more detail in the discussion.
7) The first paragraph of the discussion introduces the idea of physicians’ smoking behaviors, which has nothing to do with the results presented. This should be deleted, or the relevance clarified.
8) Page 15, top, why are Hispanic physicians in greater need of training?

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

1) Page 2, Results: should read “The response rate…”
2) Page 2, Results: “middle-age males.”
3) Page 2, Results: The majority of respondents (report #).
4) Page 2, Results: they routinely ask- is this a response on the instrument or does “routinely” infer a number- if so, report.
5) Page 3, Results: “encountered barriers”
6) Page 3, Results: “intervention recommended”, delete “that is”
7) Page 4, Background, 5th sentence: both should either be “doctors” or “physicians” for clarity.
8) Page 5, Methods, 4th sentence: delete “tobacco”
9) Page 7, 1st sentence, last paragraph: “explores tobacco counseling.”
10) Page 8, Results, define practices included under “primary care.”
11) Page 10, 1st paragraph, “frequently encountered barriers”
Page 11, Discussion, “The study provides

Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of importance in its field

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

Statistical review: No

Declaration of competing interests:
I have no competing interests