Author's response to reviews

Title: Does trust in health care influence the use of complementary and alternative medicine by chronically ill patients?

Authors:

Atie A van den Brink-Muinen (a.vandenbrink@nivel.nl)
Mieke PM Rijken (m.rijken@nivel.nl)

Version: 3 Date: 22 June 2006

Author's response to reviews: see over
Cover letter to MS: 1143820241989867

Thank you for giving me the opportunity to revise my article ‘Does trust in health care influence the use of complementary and alternative medicine by chronically ill people?’

I would also like to thank the reviewers of my article for their useful and important comments on my article. I have addressed the comments as follows, in the order as was written in the reviewers’ report.

In general
I have changed the manuscript by more addressing public health and policy issues in order to make the article of interest to the audience of BMC Public Health

Reviewer Mark Hall
1. I have dropped research question 2a and 2b. I agreed with this comment
2. I have sent the article to a professional translating agency. I assume that the language is correct and clear now
3. I have given more details of the factor analysis, as factor loadings and explained variances: see Method section, par. statistical analyses
4. I have made more clear what are ‘present medical possibilities’. Therefore, I also changed the translation into existing medical possibilities. I also included the differences between the concepts into the discussion. I stated that trust in present health care is a broad concept, including both cure and care, while trust in existing medical possibilities is specifically aimed at treatment
5. I have shortened the introduction as suggested, by skipping the general discussion on trust. However, the second reviewer asked for more information about motives for using CAM, so therefore the introduction became somewhat longer
6. I have shortened the survey description in the Method section
7. I have weakened the remark in the Discussion that the Dutch financing system causes lower trust
8. I have skipped the statement that one kind of trust is lower than another kind of trust.

Reviewer Marja Verhoef
1. I have changed certificated into certified
2. The variables included in the logistic analysis were described in the literature as potential confounders and these variables were significantly related to trust and/or CAM use. Therefore, I decided to include them in the final model.
3. I have addressed the validity of the scale in the method section.
4. I have written out health care professionals
5. I have described more clearly the concepts: see also my answer on reviewer 1 about this issue, point 4
6. I have more extensively described the motives for using CAM in the introduction
7. I have followed this suggestion
8. I have followed this suggestion
9. I have described the tests more clearly
10. I have changed the figures into actual percentages
11. I have described this more clearly; see also my answer on reviewer 1, point 3
12. The category ‘recent users’ are users in 2003/2004. The numbers on the top line of
table 3 and table 4 do not add up to 1625 because of missing data. However, I have
skipped table 3 in the revised manuscript, following the suggestion of reviewer 1
13. In the heading of table 4 (in the revised manuscript table 3) was written that the
figures are means and standard deviations
14. I have changed this on the reviewer’s suggestion
15. I have written this more carefully