Author’s response to reviews:

Title: Health-related quality of life in diabetic patients and controls without diabetes in refugee camps in the Gaza strip: a cross-sectional study

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Reviewer 1

Major Compulsory Revisions
1. Co-morbidities and complications:
   We distinguished between complications (related to diabetes) and comorbidities (not related to diabetes).
   We considered several diseases with vascular ethiology (nephropathy, neuropathy, retinopathy or diabetic foot) as complications of diabetes (section characteristic of the sample). We added now the information that patients' charts were reviewed to determine whether the diseases were complications or co-morbidities.

2. Statistical analysis:
   We shortened the description of model-building strategy and included a reference to standard recommendations. We did not perform a formal calculation of sample size in front of the study. Clearly, we did not expect only a small difference between the groups and therefore a much smaller sample would be sufficient to demonstrate the differences. We follow also the critics of sample size calculation based on effect sizes.

3. Discussion: the large impact of diabetes on the HRQoL under bad living conditions / exclusion of patients with co-morbidities
   We did not exclude patients with diseases classified as complications of diabetes. We also did not see a large effect of diabetes on environmental domain (Tab. 3, last column). Low income affected in an equal way diabetic patients and controls.

Minor Essential Revisions

1. Background: We added a sentence explaining that the secondary aim was to evaluate the psychometric properties of the Arabic version of the WHOQOL-BREF.

2. Methods, Sample: We added a statement that the number of controls refusing to participate was not recorded.

3. Results: We added a table (Table 2) on medical data for diabetes patients by gender.

4. Tables: We subdivided the table into two parts and gave a brief description on how the table has to be interpreted in the text.

Reviewer 2

Major Compulsory Revisions
1. Limited generalisability?
   We added an explanation of alternatives to UNRWA clinics available for the patients. Since we do not have any information about other patients we cannot estimate the extent of difference.
2. No comorbidity in the study groups and impact of age on HRQOL
The reason for excluding any chronic diseases not related to diabetes was the purpose of comparing diabetic patients to healthy controls. We do not suggest that there is no decrease in HRQOL with age in general, but it was relatively small in the studied sample.

3. Differences in characteristics between study groups
The sampling procedure for controls can potentially result in very similar groups, which would be the purpose, if mainly the effect of diabetes has to be studied. We added a commentary on the large difference in education status. All comparisons between categorical variables were based on chi-square test.

4. Multivariate vs. multivariable
The scores of the different domains are potentially correlated within persons; we used therefore a multivariate approach, which controls for the correlation between outcome variables. This has also the additional benefit, that the same set of independent variables is analysed for all outcomes despite variable selection. We added this explanation to the text.

5. Approach to interaction terms
We added the investigation of effect modification as an explicit goal of the analysis. Reporting effect modification is a challenge. We decided not to report the effects in separate strata but in comparison to a joint reference group. We added an exemplary calculation in the text on how the results should be interpreted. Instead of focussing on significance testing which would be strongly inflated by the large number of comparisons we propose to evaluate the effect sizes: we assume differences of more than 5 points to be meaningful. We added this explanation to the text.

6. Lower HRQOL in women
We rephrased our statement in discussion.

Minor Essential Revisions
1. Case-control
We removed the terminology from the title, but use it for technical reasons further in the text.

2. Grammar check
We asked a native speaker to review the text.