Reviewer's report

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

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Reviewer: Per Wändell

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General
This is a very interesting study, analysing the health-related quality of life (HRQoL) in diabetic patients living under very special circumstances. The manuscript is well written, and the study is well performed and well described.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
1. in Methods, Sample: it is stated that subjects with co-morbidities other than those clearly related to diabetes were excluded. What about cardiovascular disease, such as coronary heart disease, cerebro-vascular disease and peripheral artery disease, often referred to as macrovascular complications, are these diseases used as exclusion criteria or not?
2. in Methods, Statistical analysis: this section is rather difficult to understand. I would prefer if the authors write which variables are excluded in each step of the analysis, it would be easier for the reader to understand the procedure without having to read it several times. I also would like to see a calculation of the statistical power of the study. I agree with the statement in the Discussion that the sample size is large enough to make an adequate analysis; this could be expressed in different ways, one way is to use effect size (ratio between difference and standard deviation), to yield an effect size of >0.20 (referred to as a small difference), when using paired t-test, you would need 197 subjects in each group to get a statistical power of 0.80.
3. in Discussion: the large impact of diabetes on the HRQoL could be further commented. In general (as seen in reviews or the separate studies), the largest effect on HRQoL in diabetic patients is mostly vascular and non-vascular co-morbidities, and if I understand the authors right these are sorted away. Thus, we see a huge impact on the HRQoL in diabetic patients living in the very special circumstances in the refugee camps in the Gaza strip. The authors write that findings may not be generalisable; still, I think the authors can discuss implications of the findings in the study. Obviously, people with an illness such as diabetes experience a very bad health when living under the circumstances as in this study (or can the findings be interpreted in another way); we know that very many people around the world actually are living under these circumstances, and this is really alarming.

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. in Background, a secondary aim was obviously to evaluate the psychometric properties of the Arabic version of the WHOQOL-BREF, and this should be stated.
2. in Methods, Sample: The control subjects: in the Discussion is stated that the number of eligible controls who refused to participate were not recorded; this ought to be stated in Methods as well.
3. in Results, medical data are shown very sparsely; I would prefer that more data are shown, e.g., mean value of duration, rate of complications as well as of treatment among men and women.
4. in Tables: some text to the Tables could be valuable to the readers; especially Table 3 is rather difficult to understand at a first glance, besides, it would also be easier if the authors more clearly separate the analyses dealing with diabetes patients and controls from those dealing with the other variables.

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: Acceptable

Statistical review: No

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