Author's response to reviews

Title: The impact of smoking on adherence to treatment for latent tuberculosis infection

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Author's response to reviews: see over
Reviewer's report

Title: The impact of smoking on adherence to latent tuberculosis infection treatment

Version: 1 Date: 1 December 2005

Reviewer: Mark Lobato

Reviewer's report:

General
The association between smoking and tuberculosis has been noted in various settings. This paper is important because it links interventions that may improve health behaviors with adherence to preventive treatment for preventing progression of LTBI to TB disease.

Major Compulsory Revisions
I. METHODS

1. The authors need to clarify and more fully describe the patients from the convenience sample. Were all consecutive patients asked to enroll in the study? Yes they were consecutive and eligibility was defined according to the level of understanding of the languages of the survey. Since the majority of the foreign born patients were from countries with either French or English as their first or second language we had very few patients that were not asked to participate. We added the information in the first and last sentence of the first paragraph of the methods section;

2. The self-administered questionnaire was in English and French. Were patients who were not literate in either of the two languages not enrolled? The self-administered questionnaire dealt with demographic data only (age, gender, region of birth), on the other hand, smoking status and nicotine dependence was assessed by the nurse clinician in a face to face interview. See the first paragraph and the first sentence of the second paragraph of the methods section on page 3

3. Were translators included? No, as the majority of our patients were fluent in one of the two languages of the survey. We clarified this aspect of the study in the first sentence of the second paragraph of the methods section

4. Although the clinic where enrollment took place was new immigrants and refugees, if only English and French literate patients were enrolled, a selection bias may be at work favoring enrollment of persons from higher socioeconomic strata. Please clarify. We agree and recognized this limitation in the third sentence of the second paragraph on page 6(discussion section).

II. RESULTS
1. 87% of the study population was foreign born. What were the most common countries that patients came from? We added this information in the third sentence of the result section on page 4

III. DISCUSSION
In the second paragraph, the discussion regarding why males are less adherent to LTBI treatment is speculative. No data are offered to support this discussion. We agree and recognized this as a speculation and added some data to try to support it. A more plausible reason for the association between poor adherence and gender is that males are less likely to adhere to healthy behaviors and prevention messages such as smoking cessation and adherence to treatment. We agree and also added the additional explanation provided by the reviewer. Both points can be found in the first paragraph of the discussion section on page 6.

Minor Essential Revisions
I. ABSTRACT - Conclusions
The study outcome is adherence to treatment for LTBI. I think the latter clause should be reversed unless some other meaning is meant, i.e. "...smoking cessation interventions for patients with LTBI may be an opportunity to study and improve adherence to treatment for LTBI among patients with tobacco dependence." We reviewed our conclusion to respect both reviewer concerns. Please see our new conclusion in the abstract and the last sentence on page 6.

II. METHODS
1. Change "poor" adherence to "non" adherence. Thank you, done throughout the manuscript and in table.

2. Need to restate the sentence that the level of LTBI treatment was "tested for associations with ..," (delete "contrasted"). Thank you, done throughout the manuscript and abstract.

III. RESULTS
What percentage of patients was tobacco dependent? 17%. We added this information on line 8-9 of the first paragraph of the result section.

IV. DISCUSSION
The second and third sentences should not compare the study population to Canadians. The comparable comparison groups are persons in Africa and Asia. Thank you, we modified the text accordingly and changed the reference to a WHO document. (second sentence of the first paragraph of the discussion section on page 5).

Discretionary Revisions
I. TITLE
Consider changing to "The impact of smoking on adherence to treatment for latent tuberculosis infection" Thank you, We made the change.

II. METHODS
1. Change "non-ex" smokers to "non- and ex-" Thank you, we made the changes throughout the text and abstract.

What next?: Accept after minor essential 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.
Reviewer's report

Title: The impact of smoking on adherence to latent tuberculosis infection treatment

Version: 1 Date: 20 December 2005

Reviewer: Peter Davies

Reviewer's report:

General
The study was based on a questionnaire among those taking preventive treatment for LTBI. The only significant finding was that smoking and gender were associated with non-compliance. This finding is of some interest. The authors have turned the results round to imply that smoking cessation may improve compliance. There is no evidence for this here.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
I believe the authors should turn the paper round to follow more directly the way they have carried out the study. The message is that only males and smokers need to have extra supervision to ensure compliance with preventive treatment. We agree with this twist of reasoning and revised the conclusion accordingly in the abstract and in the text as well as the second paragraph of the discussion on page 5.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct) none

Discretionary Revisions (which the author can choose to ignore)
None

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

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable Statistical review: No

Declaration of competing interests: none