Reviewer’s report

Title: Comparison of a high and a low intensity smoking cessation intervention in a dentistry setting in Sweden - a randomized trial

Version: 3 Date: 23 September 2008

Reviewer: Judith Gordon

Reviewer’s report:

I appreciate that the authors have attempted to be responsive to the previous critique. Several aspects of the manuscript have been greatly improved. However, the addition of information that was missing in the previous manuscript has revealed some major errors in the assumptions upon which the analyses were based.

The authors now include a CONSORT-type diagram, which is very useful. This diagram (and related text) illustrate that 29% of HIT participants did not complete the program. It also shows that there were differential response rates by condition.

My specific recommendations are listed below:

Preliminary Analyses

• Attrition analyses need to be performed and reported.

Outcome Analyses

• The absolute quit rates are never mentioned in the text. This needs to be done in both the results and discussion sections. In addition, Statistics should be given in the text (e.g., Chi-sq, f-test, etc.).

• It is unclear which variables (e.g., gender, age, number of cigarettes consumed at baseline) were controlled for in subsequent analyses.

Moderators of Quitting

• The analyses of moderating variables (e.g., education) are incorrect, and should be conducted according to Aiken and West (1991; Multiple regression: testing and interpreting interactions).

• Once the correct analyses are performed correctly, Tables 3 and 4 should be unnecessary, and only significant results should be included in the text.

• In addition, it is unclear which part of the study sample was used in these analyses. For some variables (e.g., those collected at baseline), the reader must assume the entire sample was used. However, for other variables (e.g., those collected at follow up, such as support used), a sub-set of the sample that did not
include the HIT drop-outs must have been use. This creates bias, and analyses in which the entire sample is not included should be dropped.

• Finally, the measure of depression is one item with no apparent reliability and validity data. If it was used in other studies, please supply the psychometric properties. Otherwise, please note this as a limitation of the study.

Organization of the Results Section

• The results section is difficult to follow. It needs to be broken down into sections, including “Participant Characteristics” (into which the description of the sample and the second paragraph on page 11 should be moved), “Preliminary Analyses” (into which the new attrition analyses should be placed, and the paragraph on page 12 should be moved), “Primary Outcome Analyses” (or similar), “Moderators of Abstinence,” “Predictors of Quitting,” etc.

• As mentioned above, statistics for significant results should be included in the text.

Discussion

The Discussion section is long, with much repetition from the Results section. It would be preferable to see more interpretation of the results by the authors, and comparisons to other studies, rather than a repeat of what is already in the Results section.

- Minor Essential Revisions

I wish I could write in Swedish half as well as the authors write in English. However, there is still room for improvement in this manuscript. Several sentences are awkward. For example, page 6, paragraph 1, last sentence, “Information about possible benefits of Nicotine Replacement Therapy (NRT) was included in both programs but no recommendation of use or not was given.” A thorough editing by a native English speaker would benefit the final manuscript.

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

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

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:

I declare that I have no competing interests.