Author's response to reviews

Title: Voice disorders in teachers: results from a French survey

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Author's response to reviews: see over
Dear Editor,

We would like to thank you and the reviewers for the fair and helpful comments we received. As suggested, we have revised our manuscript: “Voice disorders in teachers: results from a French survey” by NERRIERE E. and KOVESS-MASFETY V. for publication as a type of article in your journal.

The manuscript has been revised according to the comments that were made. All changes are highlighted in the text and you will find below an explanation of how we addressed the different concerns and suggestions.

We look forward to receiving your decision.

Yours sincerely,

Eléna NERRIERE
Reviewer: Abdul-latif Hamdan

1- How did the authors define hoarseness? Is it a change in voice quality as reported by the subjects filling the questionnaires, or roughness, breathiness or other?

We define the hoarseness as a sounding rough and unpleasant, especially because of a sore throat reported by the subject filling the questionnaires.

2- Why did they choose frog in the throat and sore throat as voice disorders related symptoms, and not other vocal symptoms such as vocal fatigue, dysphonia, loss of range or others? Because these symptoms fall under the reflux symptoms of Laryngo Pharyngeal Reflux Disease which of course can co-exist with dysphonia.

We agree with the remark of the reviewer on these potential symptoms, but we chose symptoms best known by the teachers and which are part of the medical jargon in France.

3- It would have been informative to include the number of hours of teaching per week and to investigate the presence or absence of risk factors in both groups such as smoking, phonotraumatic behavior, reflux, allergy or other.

These variables were tested but no difference between the groups of teachers suffering from disorders and the others were significant.

We would have anticipated a more significant difference in the prevalence of vocal symptoms in women versus men, knowing that one third of women suffer from Post Menopausal Vocal Syndrome.

In this active population 15% of the women only have passed menopause; in addition male teachers are more at risk than male in other professions which may decline the gender contrast.

It would be informative if the authors could elaborate more on the importance and how would vocal training enhance the vocal performance in teachers and reduce the incidence of vocal disorders in this group of professional voice users.

This point was added in the conclusion
Reviewer: Felix I.C.R.S de Jong

Page 5 In 2005, 20,099 mutualists, aged 18 years or over, were selected proportionally at the national level (France metropolitan and Dom Tom) and received a questionnaire by post. How was the selection precisely performed?

With a size of 1,181,940 agents, trainees and not holders on January 31st, 2003 for France metropolitain and DOM TOM, the personnel remunerated as the public area of the Ministry of Youth, state education and Research (scholastic education and higher education) represents 4.5% of working population. The MGEN (Mutuelle Générèle de l’Education Générale) is the organism of French national health and pensions organization. It also covers Ministries of Culture and ecology, as well as certain research public agencies (INSERM, CNRS). Moreover, she assures in an optional manner the supplementary coverage of these personals and of their having rights. Cohort was constituted from a random sample in the 100th on the basis of the internal number of the affiliated members, unique and individual.

Since the objective of this study was to describe the voice teachers among, we only used respondents who were actually employed and excluded job seekers, retirees and unemployed persons.

Page 5,6 Include the questionnaire in an appendix.

We thank the reviewer for this suggestion; the questionnaire was included in an appendix in the revised version.

Page 6 The statistical methods should be explained more in detail.

The statistical methods are now explained more in detail in the revised version.

Page 7 The breakdown of the group into teachers and non-teachers is not clear.

Persons qualified as teachers had to actually be giving classes to students. This precision was added into the text.

Page 7 When teachers (n=3,646) and non-teachers (n=1,933) were compared there was a significantly lower prevalence of voice disorders among non-teachers (p<0.001). What is meant here with “voice disorders”?

There was a mistake in the number here, the size of non teachers is 917 not 1,933. We apologize for this mistake. One variable named ‘voice disorders’ was created when was declared at least one disorder of the list.
Page 7 “sore throat, followed by frog in the throat for men and hoarseness” are called problems here. Elsewhere these items are called disorders. I would prefer the term “symptoms”.

We thank the reviewer for his suggestion. We have made the change.

Page 7 No significant differences were observed between the prevalence of different voice disorders for each age group, except for sore throat where a peak was observed for both male and female teachers aged 26#35 years (p<0.0001). How was this calculated? Give statistic explanation.

We used the Chi2 test to compare the prevalence of voice disorders according to the different age group. Results were only significant for sore throat symptom where the prevalence were stronger in teachers aged 26#35 years.

Page 8 However, it should be noted that there was a trend towards higher prevalence of voice disorders among teachers of nursery classes than among teachers of other classes (data not shown). Similarly, when prevalence was compared as a function of type of teaching (music, EPS/dance vs. other subjects), the prevalence of voice disorders was appreciably higher among music teachers (data not shown). Supply data.

Data were added into the text.

Page 8 A number of active teachers underwent vocal training. Women reported that they had undertaken vocal training more often than men (18 % vs. 10 %), which corresponds to the fact that they present with these disorders more often than men. I do not understand this.

The women suffer more voice disorders, our hypothesis is that they are can be more encouraged to follow a formation to learn how to pose the voice. We formulated differently in the revised version.

Page 8 When the data are compared as a function of length of time spent in the teaching profession, women at the start of their careers (<5 years in the profession) more often reported voice disorders than individuals who had spent longer in the teaching profession (from 6 to 29 years) (55.6% vs. 49%). They were also more likely to have undergone voice training than teachers who had been in the profession for a long time (24 % vs.15 %). Significance level?

We have completed it into the text (P<0.05).
Fig. 2 “psyciatrics disorders” This is a heavy interpretation of the scores of the list. It has been changed for mental health problems.


Page 11 We have demonstrated that women at the start of their career (<5 years as a teacher) suffer more voice disorders than teachers who have been in the job for longer (from 6 to 29 years) (55.6% vs. 49%, respectively). See also: Kooijman PGC., Thomas G, Graamans K., Jong FICRS de. “Psychosocial Impact of the Teacher's Voice Throughout the Career”. J Voice. 2006 Mar 15.

We thank the reviewer for these good references which have been added to the discussion.

Page 12 notably major depression Explain this heavy statement. Notably has been taken out; it was a misunderstanding of the translator.

References are not up-to-date.

Three references have been added to the list (Jong et al 2006, Kooijman et al 2006 and Bovo et al 2007).

The legends are too brief and inadequate.

Legends have been completed.