Author’s response to reviews

Title: Chronic disease prevalence and care among elderly in urban and rural Beijing, China - a 10/66 Dementia Research Group cross-sectional survey

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Author’s response to reviews: see over
Dear BMC Public Health Associate Editor,

Thank you for your email. We appreciate your helpful additional comments and suggestions and have revised our paper accordingly. Our responses and changes are summarised below:

**Associate Editor comments:**

1. **Add to Table 1 a footnote detailing (briefly and clearly) the measurement of occupation and assets.**

   We now added two footnotes in table 1 to give more detail information of the measurements of occupation and assets.

2. **Give more details on treated and controlled hypertension. How were both measured?**

   We had described the measurement of hypertension, together with the definitions of detected hypertension and controlled hypertension in our previous manuscript. We had not defined treated hypertension and have now done so. In brief, all those with self-reported hypertension and/or a blood pressure measurement meeting the European Society of Hypertension criteria were considered to have hypertension. Those with self-reported hypertension but not meeting ESH criteria were considered to be controlled. In the revised version, we have now added the definition of treated hypertension. Those with self-reported treatment (“Were you started on treatment?”) were considered to be treated.

3. **Add (in your own words) in the Discussion that you had set out to examine three broad research questions; questions that are interrelated of course, but that these questions, for a full account, need even more in-depth dedicated studies.**

   We have added a paragraph at the beginning of the Discussion to address this issue.

4. **Table 5 is difficult: (a) sometimes the outcome refers to the participants, sometimes to his/her caregiver: please indicate more clearly, perhaps with a footnote (have an additional look also at the Methods to further clarify this), (b) the control for dementia is not clear. Why dementia? Why not all other diseases? Please clarify this in text, (c) different analyses depending upon the outcome. Please clarify further in Methods and/or in footnote of Table 5, and (d) somewhat more detail on (some of) the measurements in the Table 5’s footnote.**

   We have revised table 5 accordingly. The changes are summarised below:

   (a) We have clarified the domain headings to indicate more clearly whether the outcome refers to the care recipient or the caregiver. We have checked back to the methods section to ensure that everything is consistent and clear.

   (b) We have clarified in the methods that previous research has indicated that, among people needing care, dementia is a major determinant of the level and type of informal care provided, and of the extent of caregiver strain. This is the justification for stratifying people needing care by dementia status, and for controlling for dementia status in the rural / urban comparisons. In the results section, we have already highlighted that people with dementia were more disabled than others needing care and more likely to be rated as needing care ‘much of the time’. Carers of people with dementia spent more time assisting with basic
activities of daily living, particularly communication, dressing, eating, grooming and toileting. Caregiver strain, measured using the Zarit Burden Interview was also higher among those caring for people with dementia. This is consistent with the previously cited research. It was therefore clearly important to control for dementia diagnosis in comparing urban and rural samples.

(c) We have clarified the analysis methods both in the Method section and in the footnotes of table 5.

(d) As per a) above, by editing the domain headings, measurement descriptions and abbreviation list in the footnotes we have now been as explicit as we can about the domain of measurement, and the specific assessment used in each case. We have checked for consistency with the methods section.

**Reviewer (Bei Wu)’s comments**

Bei Wu says simply that nothing need to be changed. (We were unclear what you meant when you said in your email, after listing your comments, that ’As you will see there have been some further concerns regarding your manuscript’?).

Thank you again for all the comments and suggestion. If you think we need add more information, please let us know.

Best Regards,

Dr. Zhaorui Liu; Dr. Emiliano Albanese; Prof. Yueqin Huang and Professor Martin Prince for and on behalf of the 10/66 Dementia Research Group