Author’s response to reviews

Title: Identifying the Tuskegee Syphilis Study: Findings and Implications based upon Recall vs Recognition Questions

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

Re: Manuscript ID 1027493451261217 at BMC Public Health

September 29, 2009

Dear Editor,

On behalf of my co-authors, I am pleased to re-submit our revised manuscript “Identifying the Tuskegee Syphilis Study: Implications from Results using Recall vs Recognition Questions” (a slightly revised title) to BMC Public Health. We have carefully read and incorporated most of the suggestions of the Reviewers, and in the few instances in which we differ with the reviewers, we have explained why we prefer our original approach. Overall, we thank you and the reviewers for their suggestions which have indeed served to improved ‘the flow’ of the manuscript. As a result of the reviewers suggestions and requests for clarifications and expansions, the manuscript now has 3,498 words.

DETAILED RESPONSES to Comments by Reviewer #1-3
09/29/09

REVIEWERS #1 and #3

Reviewer #1 (A.D.) Comments and our Responses
Overall:
a) limitations of work now stated in Discussion Section
b) implications of findings, as requested, expanded in Discussion Section and added to title

Major Compulsory Revisions:
1) DONE, see ‘a’ above….now in Discussion section
2) DONE, see ‘b’ above, now in Discussion section and in revised title
3) DONE, clarified by added sentences in the Methods section
4) DONE, via added sentences in Results section

Discretionary Revisions:
1) NOT DONE< while it would be easy to put the two key questions into the text (and we could do it readily), we feel it would be repetitive as both questions are better and more fully presented in a Table as we had it, which we feel is the ‘clearer presentation’ of the exact format of the key questions as used in the survey. Also, use of a separate Table facilitates readers use of the Table in lecture presentations as a separate, but key, slide in an A-V presentation on the findings of this article.
2) DONE, as suggested by the reviewer (i.e., the 15 sub-categories listed in a footnote at the bottom of the page

Reviewer #3 (L.B.) Comments and our Responses
Introduction
1) DONE, goal statement rewritten to be more specific
Methods
1) already IN manuscript: Both the response rate and completion rate were given in the Results section of the our original submission….and remain there. Some authors prefer placing ‘administrative results’ (i.e., response rate in Methods…but we are among those who prefer it in the Results section, and for this study have consistently presented ALL RESULTS (including administrative outcomes in the Results section) in all prior publications related to the Tuskegee Legacy Project study.

2) DONE, as a sentence was added to the Methods section on languages used in the administration of the TLP Q.

3) NOT DONE, as we have used this term (Puerto Rican Hispanic) for clarity in all our published ms’s, to both identify this group as ‘Hispanic’ and to distinguish this Hispanic sub-group (Puerto Rican origins) from the other Hispanic groups in the US (e.g., Mexican-origin, Central American Hispanic, South American Hispanic, etc.)

4) DONE, done uniformly throughout ms including Table 2….as it was done in the originally submitted ms for nearly all references to Q27 or Q28.

5) DONE, we have expanded the description of the independent and dependent variables in the Methods section

6) DONE, as we have added a few sentences in the Methods section addressing the planned analyses, as well as addressing the reviewer’s question on whether any qualitative software was used for the coding of key words (answer: no)

Results
1) DONE on Table 2 eliminating % symbol throughout the Table, but NOT DONE as regards redoing Table 2 totally by race/ethnicity. First, the key race/ethnicity findings are clearly presented both in Fig 1 and in Fig 2. Second, the complexity of Table 2 for the overall study sample is the point of Table 2 and constructing either one monster Tables (with separate sections for Blacks, one for Whites, one for Hispanics) would be overly complex to comprehend (especially given that key racial/ethnic differences are clearly and concisely presented in Figs 1 & 2). Table 2, as originally constructed, does include the presentation by race/ethnicity for the two key questions.

2) DONE, as the labeling of the vertical axis was added to Figs 1 & 2, but NOT DONE for making each response within race a ‘separate bar’ as we believe that the use of ‘a stacked bar’ enhances the readers’ ability ‘to see’ the findings as the use of the stacked bar ‘makes obvious and immediate’ that the sub-categories total 100%, i.e., that each sub-category is a ‘part of the whole’ answer pattern.

3) DONE, the typo in Fig 2 was corrected to read ‘1,162’

4) DONE, clarification wording related to the p-values added to footnotes in Figs 1 & 2

Discussion
1) DONE, as concerns ‘richer use of references from prior studies’ issue…by adding sentence stating ‘no prior work on this level of detail’ exists, thus clarifying for the reader that that is ‘no prior published studies’ at this level of detail.
2) DONE, as limitation of the study were added to the Discussion section.

**REVIEWER #2**

1) **DISAGREE** (obviously) with this Reviewer’s view that this ms would have ‘limited impact on public health’….and clearly Reviewers’ #1 & #3 also disagree with Reviewer #2’s judgment on the value of this manuscript.

2) Not clear what this Reviewer is saying here exactly, but we intended to provide readers with a rather rich listing of the existing related literature on this topic….but if it is preferred by the editor, we could ‘cull this rich list’ of references to just a ‘few key ones’…..it would depend on your view as editor as to balancing ‘a rich list of literature references’ vs ‘space taken to list all those references’. I’d assume, given this is an online journal, that the ‘space taken’ is not the same critical fiscal issue as it is with print journals.

3) Statistical analyses were clearly presented in the originally submitted ms, but what has now been added (as specifically requested by the other Reviewers) is a statistical analysis plan in the Methods section.

4) The p-value in Fig 1, as originally presented, was re-checked is a correct.

5) The opening sentence in the Results section clearly states that this TLP Questionnaire ‘was administered to 1,162 adults’….vs 1,162 were approached to participate in the survey). This phrase ‘was administered to’ has been used successfully in our prior publications from this study…and is the ‘common phrase’ used in survey research. We could add “was administered to, and completed by, 1,162 adults” but we feel that would redundant and awkward. If the editor prefers this later phrasing (with the 3 added words), we would not find that objectionable, just a bit redundant.

6) On this point (“The manuscript is poor in writing”) this Reviewer again stands in contrast to the other two reviewers. I assume that, as Editor, you also disagree overall with this reviewers two major viewpoints (‘of little public health value’, and ‘is poorly written’) or you would not have forwarded this manuscript back to me for ‘revision’.

Sincerely,

![Signature]

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