Author's response to reviews

Title: Depression and Anxiety as major determinants of neck pain: a cross-sectional study in general practice

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Author's response to reviews: see over
Dear Dr Norton

We thank you and the reviewer for the remaining comments regarding the revised version of our manuscript MS 2042568431219709 entitled, “Depression and Anxiety as major determinants of neck pain: a cross-sectional study in general practice”.

We hope that we have been responsive to your remaining comments. We would like to thank you, and the reviewers, again for the thoughtful review of the initial version of our paper.

Please do not hesitate to contact us should there be any problems or questions.

Yours sincerely,

Martin Scherer
We thank the reviewers for their time and thoughtful critics of our manuscript. Our responses are directly beneath the original reviewer comment.

Reviewer 1: Scott Patten

Minor Essential Revisions:
The author can be trusted to make these. For example, missing labels on figures, the wrong use of a term, spelling mistakes.

Done.

1. On page 8, it should be "in total" rather than "on total"

Done.

2. In the second last sentence of the results section, "analyses" is plural, so the accompanying article should also be plural "These analyses..." rather than "This analyses.."

Done.

Discretionary Revisions:

These are recommendations for improvement which the author can choose to ignore. For example clarifications, data that would be useful but not essential.

1. I feel that the manuscript now achieves the right balance with respect to causal interpretations.
   The conclusions section of the abstract now draws a distinction between the assessment of burden (a descriptive epidemiologic aim that does not invoke causal assumptions) and hypothesis generation - also a legitimate goal for cross-sectional studies in analytical epidemiologic research. In view of this distinction, I tend to think that the abstract could be strengthened by reporting the associations with education level, social support deficits and exercise. Since these effects disappear with adjustment for depression and anxiety scores they may either be confounded by the psychosocial characteristics, or may share a causal chain with the psychosocial characteristics. Nevertheless, in a descriptive sense, they do help to add to what the study accomplishes at a descriptive level. I think it would be sufficient to include a sentence indicating that associations with these variables were seen, but that they did not persist with adjustment for the depression and anxiety.

   We included a sentence reporting on bivariate associations that did not persist in multivariate analyses (see results section of the abstract).

2. In the text, the changes between crude and adjusted analyses are summarized in a paragraph on page 10. Readers would be interested in the authors' interpretations of the findings - is it because these variables are on a chain of causal events? Or, is it because they are confounded by depression and anxiety?
We now clarify this point as follows: “This inconsistency might be traced back to a confounding effect of socio-demographic characteristics”.

Reviewer 2: Swenne van den Heuvel

Most comments have been dealt satisfactory. However, one major issue still remains. The study mentions two objectives, (1) to identify factors that might interfere with neck pain, and (2) to recommend selection criteria for neck pain therapy. Although the phrasing of the second objective has been changed, my point is still the same: the design is not fit to determine selection criteria or to determine what therapy is the most proper in patients with high NPAD scores. My suggestion would be to limit the article to the first objective.

We now focus on objective (1) and do not mention objective (2) any more.