Reviewer's report

Title: Acupuncture for osteoarthritis of the knee: A pilot study for an open parallel-arm randomised controlled trial

Version: 2 Date: 19 August 2009

Reviewer: Marlene Fransen

Reviewer's report:

Major Revisions:
Table 3: values for Outcomes at 3 months are identical to those listed for 12 months?
Figure 2: Y axis extended to 0-20 (full score range)
Figure 3: y axis extended to 0-96 (full score range)

Title: Acupuncture for knee pain. A pilot study.....
(Unless recruits are selected on established OA knee diagnostic criteria)
Later in introduction you can allude to fact that most people aged 50 and over with chronic knee pain, the pain will be attributable to OA.
Delete last sentence, second paragraph, in the Introduction.
Not referenced - simply your opinion.

Third paragraph of Introduction. It is very counterintuitive that effect sizes would be larger for meta-analysis evaluating acupuncture against an active comparator (usual care alone) versus a placebo comparator. Please add some explanation for this finding. Please clarify that placebo is sham acupuncture, so these are studies where patients are blinded, versus unblinded studies (most vulnerable to bias).
This may be the reason for the NICE recommendations? The additions of 95% CI around the effect sizes is also warranted.

The fact that two large RCTs demonstrated no difference between sham acupuncture and TCA should not be dismissed by you. In meta-analysis, several biased studies can influence the aggregate findings markedly.

Discussion

Key Findings
Placing a minimum pain rating for study eligibility (which is good idea) will have implications for recruitment rate and number of required collaborating GP practices which you need to discuss. What percentage of your recruits would have been ineligible?
Comparisons with other studies
This paragraph is a repeat of the introduction. Delete from discussion.

Minor Essential Revisions
Still no evaluation of co-morbidity in the outcome measures. There are validated self-report measure of co-morbidity that could be used with your mail-out method of data collection.

The term 'data' is plural, not singular. eg. baseline data are presented...
Change throughout manuscript.

Many sentences are far too lengthy and cumbersome. Breaking up into two sentences will increase readability.

Key Findings.
Second sentence needs correcting to: ... we found that 23% of patients identified on a York-based GP database as eligible agreed to be recruited.

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, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:
I declare that I have no competing interests