Author's response to reviews

Title: Is health related quality of life associated with the risk of low-energy wrist fracture? A case control study.

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Author's response to reviews:

Gudrun Rohde
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Dear Editor,

Thank you for the comments and the positive attitude to our manuscript. We hereby submit the revised manuscript “Is health-related quality of life associated with the risk of low-energy wrist fracture? A case–control study”. We have to the best of our abilities made changes in the manuscript according to the issues raised in the comments from the reviewer.

Yours sincerely

Gudrun Rohde, RN, PhD-student

Reply to reviewer

Reviewer's report

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fracture? A case-control study

Version: 2 Date: 15 April 2009

Reviewer’s report

General comments

The manuscript has been revised to clarify the methods used in this study. The rationale for the study and the limitation of the approach, while improved over the original submission, however, are still not described very well. This manuscript requires additional editing for English language, in particular, but not limited to awkward phrasing such as, “role limitation physical” (page 10).

Reply: Further arguments for the rationale of the studies have been added page 4, para 3 and page 5, para 1. The limitation of the approach has been further discussed page 14, para 2 and 3 and page 15, para 1. OnLine English has been used as a language consultant for this manuscript. However, some improvement regarding technical phrases and consistency with respect to terminology may be called for. We have been assured that a second round of editing with respect to idiomatic and technically precise terminology has been carried out by the same agency for the latest version of our manuscript.

Intro

The rationale that no studies have examined pre-fracture HRQOL is not compelling given the current study is a case-control study of recalled pre-fracture HRQOL. Page 5, para 1.

Reply: The paragraph has been re-written

Study design

Delete “cross-sectional.” Page 5.

Reply: Changed in accordance with comment

Delete “HRQOL”. Page 6, para 1, line 1.

Reply: Changed in accordance with comment

What was the time period between data collection for case versus for his/her matched control?

Reply: The time period has been added page 6, para 3 and 4

Results of participation (and eligibility) need to be reported for controls, not just for the cases. Page 6.

Reply: Results of participation for the controls have been reported page 6, para 4 and page 7.

List the diseases used to create the “sum score”. Rephrase “sum score”. Page 7.
Reply: The sentence has been revised and “sum score” has been rephrased – “total score”. Page 7, para 2

Delete text on multivariate analysis (not part of asserting diseases) Page 7.

Reply: Changed in accordance with comment

When was BMD measured with respect to fracture and assessment of other variables? Page 7.

Reply: The BMD was measured at inclusion in the study/the visit at the osteoporosis centre. This point has been clarified page 6, para 3.

Statistical analysis

Was unconditional or conditional logistic regression used to account for the matching scheme? Page 8

Reply: We applied unconditional analysis, inserted in the relevant sentence.

Response

Rephrase/clarify: we used “enter method”. Page 9

Reply: The “enter method” has been clarified. Page 9.

Information on response for both cases and controls are needed. Page 9.

Reply: Information with regard to response for controls has been added. Page 10, para 1.

Do not abbreviate ART. Page 9

Reply: ART has been deleted

Results

The sentence ending the paragraph at top of page (“using the wrist fracture dichotomy…”) should be revised to read (for example): These associations persisted after adjustment for age. Page 10.

Reply: The sentence has been revised, page 10

“Favourable scores”… is confusing. Results should be written as (for example): Persons reporting high scores of general health and mental health and low prevalence of pain … had increase/decreases odds of fracture ….Page 10.

Reply: The paragraph has been revised/re-written, page 11

The units for each predictor need to be clear for each of the tables.

For example, if the OR for age is for one year, then the row heading should read: Age (per year). If general health is per 10 points, then this should read: General
health (per 10 points), not (scale 0-100)

Reply: The units have been clarified, page 23, table 2 and page 24, table 3

Tables

Delete the column heading: Controls (0) vs wrist fracture patients (1). ORs refer to odds being a case=odds of being a control=odds of having been exposed, etc so this heading does not make sense. Tables.

Reply: Changed in accordance with comment.

Delete: “…before fracture,” para 1 page 11. This text does not hold for controls. Need to rephrase as (for example), “in the previous year”.

Reply: Changed in accordance with comment

I do not understand the ** note in the middle of page 11. It does not belong in the middle of the results.

Reply: During the previous review-process an explanation for the meaning of the effects was demanded. This explanation has been added with a footnote marked **. Furthermore, the meaning of ** has been added, page 16.

Discussion

First paragraph need to be re-written, needs to be focused on interpreting the main message of results.

Reply: The paragraph has been re-written

First full paragraph of page 12 is still incorrect. Age is not a risk factor because the authors matched on age.

Reply: The paragraph has been re-written

Need to address selection and participation bias separately for cases and controls in discussion and how possibly affected your results. Page 13.

Reply: Selection and participation bias for controls and how it possibly affected our results has been added. Page 15, para 1.

Need to address surrounding recall bias for controls, not just cases, and how possibly affected your findings. Page 13

Reply: Recall bias for controls has been added page 14, para 2 and 3.

Need to specify limitations of self reported measurements (height, weight, co morbidities, etc) and that BMD was measured after the fracture (for cases), and discuss implications for findings.

Reply: The limitation of self reported measurements has been discussed page 14, para 3.
Need to address possible limitation that time period was median 10 days from fracture to data collection in cases but controls were likely interviewed at different point in time.

Reply: The different point in time between cases and controls has been further described in the method section page 6 and 7, and been discussed page 14, para 2 and page 15, para 3

Delete: “who are capable and willing to report their HRQOL before fracture”. Page 14.

Reply: Changed in accordance with comment

Is it possible that the inconsistent results observed in this study are including: case-control design, retrospective recall used to assess HRQOL and covariates, differences in sampling fractions for cases and controls, and other factors?

Reply: The inconsistent results have been further discussed in the discussion section, and have been emphasized page 15, para 3.

Concluding sentence does not seem warranted without a compelling biological mechanism proposed to address research question.

Reply: The biological mechanism has been added i