Reviewer’s report

Title: Don’t worry, it will not hurt at all. Are joint and soft tissue injections painful? Results of a national French cross-sectional study of procedural pain in rheumatological practice.

Version: 2 Date: 18 September 2009

Reviewer: Donna Urquhart

Reviewer’s report:

Major Compulsory Revisions

1. The authors have provided data on more than 6 different procedures, including joint aspirations, joint injections of different drugs, and a combination of both aspirations and injections. However, these procedures are grouped together in the multivariate analyses. Is it possible that the pain responses associated with these procedures may differ and need to be considered separately?

2. No information is provided regarding the validity of the verbal pain scale used. Can the authors provide this information to further support their choice of instrument?

3. Was the intensity of the patients’ pain assessed directly prior to the procedure? Could this not be a key factor influencing procedure-related pain?

4. It is stated that “The experience of each rheumatologist was determined indirectly from their age, assuming that they had started practising professionally when they were 27-years-old.” Given the authors have highlighted the importance of this factor to their findings, is it not possible to more accurately determine the number of years the rheumatologists had been practicing?

5. Did the authors obtain ethical approval? Did the patients provide informed consent? This is not stated in the manuscript.

6. No information is provided on the total number of rheumatologists that were invited to participate in the study, the number that declined (including their response rate) and the demographics of those that declined to participate.

7. Similarly, information on the total number of patients that were invited to participate in the study, their response rate and the demographics of those that declined to participate is not stated

8. In the multivariate analysis, the categories used for ‘underlying pathology’ included acute/chronic, as well as condition specific grouping, such as back pain. How would someone be categorized if they have chronic back pain? These categories don’t seem to be mutually exclusive? Are these considered separately in the analyses?
9. How did the authors deal with data from patients that had more than one procedure? This needs to be stated.

Minor Essential Revisions

1. Pg 3, Ln 2 ‘Preventative analgesia was significantly more frequently prescribed in patients with more severe procedural pain.’ Remove the term ‘significantly’.

2. Pg 5 ‘Rheumatologists were selected from the French rheumatologist’ representative TVF database (source CEGEDIM group).’ The authors need to provide the abbreviations in full.

3. Methods: What level of significance was set (p value)?

4. Pg 8 ‘tunnel syndrome’ – Please provide further information. Does this refer to carpal tunnel syndrome?

5. Pg 9 ‘The ‘type of drug’ is considered in the univariate analysis but no p value is provided in the results section.

6. Pg 13 ‘Another limitation of our study is that we did not differentiacted the devices used by the physicians.’ Change to differentiate.

7. Pg 13 ‘Several authors have emphasised the fact that size of the syringe and needle may influence pain and tissue trauma during procedure.’ Change to emphasised.

8. Figures: The figure axes need to be labeled. For example, 0-100% needs to be labeled with ‘percentage of participants’.

9. References: There are errors in the referencing ie the third reference listed in the reference list is not numbered.

Discretionary Revisions

1. Title: ‘Don’t worry, it will not hurt at all’. I am not sure what this statement adds to the title. Moreover, the title is reasonably detailed without this statement included.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

I declare I have no competing interests.