Reviewer’s report

Title: Listening to patients: Verbal data in the pretesting of ICF based measure of Osteoarthritis health outcomes

Version: 2 Date: 19 April 2010

Reviewer: Masami Akai

Reviewer’s report:

Overall evaluation: This article presents the usefulness of a cognitive interview method called “think aloud” analysis to complete self-filling questionnaire. This questionnaire named Aberdeen Measure of impairment, activity limitation and participation restriction (Ab-IAP) is reflected the ICF concepts and is examined in view of face validity.

It could have a possibility, I think, to advance the field of health related QOL study after the following questions are properly answered.

Major Points:

My main concern is a mixture of the two concepts of face validity and content validity in the present article. Of course, we realize that there is no useful statistical method to check the content validity. It is generally verified by a panel of experts’ opinion. On the contrary, face validity is usually checked by the rate of blank items (filling rate) or other calculation results to evaluate the relevance of the item content.

I am afraid that the aim of this article was not described properly. If the authors wanted to establish a methodology to verify face validity, they should perform a comparative study using the same questionnaire with or without “think aloud” analysis (cognitive interview versus 'normal' usage of the measure?). Comparison between the 59-item version and the 35-item version might bring confound factors into the context of the study design.

If not so, and they wanted to establish the feasibility of new questionnaire, the method they used could have some values. In such cases they should consider the entry criteria of the study. Why did they recruit the people with osteoarthritis of the knee and hip joints? What did the authors want to show with these people? What was their working hypothesis with such targeted subjects?

It seems to me that the authors should perform a larger survey covering wide distribution of populations and other diseases mixed up three component, i.e., impairment, activity limitation, and participation restriction, like;

Comparison between other conditions than artificial joint replacement

Relationship with age, objective and subjective health condition, and others

However, this kind of previous investigations had been already conducted to
some extent. (References No. 9, 11-14)

Minor points:

Abstract:
In “conclusion”, they described that “----were compatible with statistical analysis of the measures.” Please show us the content of statistical analysis.

Method:
I would like to know more detail about the” standardized classification scheme” and the” constant comparative technique” with brief summary. The authors should describe on content of the “item-by-item analysis”

Is the process to reduce the numbers of items of Ab-IAP from 59 items to 35 items provided in the reference No. 1?

The introduction of four types of response problems; comprehension, retrieval, judgment, and response is one of the key messages of this article. I could have sufficient examples for those typical four categories and additional categories like ‘struggle’ or ‘inadequate item’ (Is it the same as insufficient information?). I think, the authors should provide clear definition about those new categories.

Result:
The authors described some differences between preoperative group and postoperative group. Is there any difference between the hip and knee involvement?

Discussion:
As for my knowledge, statistical methods such as internal consistency or factors analysis are not used to verify face validity or content validity directly but used to investigate construct validity or criterion-related validity.

I have to point out again the concern with comparison between the 59-item version and the 35-item version.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Declaration of competing interests:**
I declare that I have no competing interests' below.