Author's response to reviews

**Title:** The COPE LBP trial: Cognitive Patient Education for Low Back Pain - a cluster randomized controlled trial in primary care

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The COPE LBP trial: Cognitive Patient Education for Low Back Pain - a cluster randomized controlled trial in primary care
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COVER LETTER
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Dear Editor;

Thank you for allowing us to refine our paper and hopefully it should now be acceptable for publication in the journal.

Please note the following comments to the concerns raised in your e-mail:

1) The paper has been edited by a native English speaking researcher and several improvements of the language have been made.
2) An acknowledgement section has been added at the end of the manuscript, including funding of the project (p. 12).
3) Q: What is not clear is whether only those randomised to provide the new educational intervention received the 2 day training course on the intervention. Can the authors address this?
   Response: This is clarified by an addition to the description of the control group (p. 8).
4) Q: More detail could be provided on a) the new intervention and b) usual care. In particular, page 7 states 'patients will be given lessons between the sessions in addition to registrations on function, pain and work absence'. This is not clear - do the authors mean homework (lessons) and what are registrations?
   Response: In this revised version we have added more information about the intervention and usual care and defined the homework and registrations (pp. 7, 8).
5) Q: Page 8 mentions two control groups but is this an error? What is usual care, and in particular why have the authors decided to control for time/interaction by ensuring that all control participants also receive 4 treatment sessions?
   Response: Yes, we have simplified the groups to one intervention group and one control group – initially we thought it to be four groups: one GP intervention, one PT intervention, one GP control and one PT control. And yes, we have also described the rationale for having the control group to perform 4 treatment sessions (p. 8).
6) Q: The sample size section could be more detailed.
   Response: The calculation of the sample size is validated by a clarification in sample size section (p. 11). We refer to a previous study by Moseley who also has a SD of 3.

We sincerely hope these corrections make the paper up to the standards of BMC Musculoskeletal Disorders and once again we thank you for these valuable comments.

Best wishes; Erik L. WERNER