Reviewer's report

Title: The course of reported pain from different body regions - a longitudinal study

Version: Date: 5 September 2005

Reviewer: Peter R Croft

Reviewer's report:

General
This is a secondary analysis of a well conducted prospective epidemiology study from 10 years ago, taking advantage of the fact that the Nordic Pain Questionnaire was used in a large population study on two separate occasions. The authors have shown that patterns of pain over time are consistent (a) in terms of chronicity at baseline and (b) between different regions.

It is easy to read, the methods clear, the design strong, the results robust, and there are some very nice figures showing the course of pain over time which certainly deserve to be in the public domain.

The main difficulty for this paper is its lack of originality - see below for suggestions as to how this might be tackled.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

1. The secondary findings related to poor self-rated health have been observed on a number of occasions before and my view is that the authors would strengthen this paper if they removed these as results and simply pointed out that they have confirmed what previous studies have shown before - namely that the presence of pain is associated with poor self-rated health and that the number of pain areas is linked with poor self-rated health.

2. The primary finding (about regional pains over time) is worth showing because the figures are a helpful addition to the literature. However the findings themselves are not surprising. Many previous studies of regional pains have illustrated that the longer the duration of pain in any one region, the more likely the pain is to persist in the future; the authors themselves quote widespread pain literature that the more pain areas at baseline, the more likely that pain will be present at follow-up; previous studies have shown that pain in one area predicts the persistence of pain in other areas; previous studies have found similar risk factors for persistence of pain in different regions. The contribution of the paper under review is that the authors have illustrated these points in a single large population, using simple instruments and elegant diagrams of the course of different patterns of pain over time. I would suggest that the authors re-write the introduction to indicate that the clear expectation from earlier studies is that concurrent regional pains will behave in similar ways over time, and that the purpose of the paper is to investigate and describe this in a large population study.

3. It would be helpful if the discussion section included critical reflection on (i) the possibility of this being artefactual reporting in a questionnaire - if a person reports one symptom, they are likely to report several, (ii) whether the findings are more likely to reflect shared risk factors (depression is linked with pain reporting, and so depressed people are more likely to report pain in several areas concurrently than those who are not depressed) or something intrinsic to pain and pain processing itself, and (iii) the public health message.

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of limited interest

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I declare that I have no competing interests