Reviewer's report

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

Version: 1 Date: 5 September 2005

Reviewer: Charlotte Leboeuf-Yde

Reviewer's report:

General

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

The manuscript lacks some information to make it worthwhile to read. These are my comments:

P.4, last para: You speak about "course of pain". However, because your study consists of two cross-sectional surveys, not of a multiple observations à la diary, this is not correct. You are not as much looking at the course of a disorder but looking at the pattern at two instances and how people fit into different categories at base-line as compared to at follow-up.

P.5, para 1. You need to provide us with some more information on the target population, the target study sample and the final study sample. Your target population is surely not the whole population of Malmö, but those of the relevant age group (47-66 yrs). You should therefore find out what the size is of this group, and the number of men and women. Then we would like to know how many you invited and how many you "caught", both at base-line and follow-up, by age and sex, so we get a feeling of to what degree your final sample is representative of the background population.

Also, I think that you should state clearly, that your report consists only of those who responded both at base-line and follow-up.

Who performed the interview?

para 2. As you will publish in an electronic journal, there is no problem of space. Therefore, please include the relevant parts of the Nordic questionnaire, as all your readers probably do not have a copy of it on their desk. Did you use the entire questionnaire or just parts of it?

Also, you need to describe how you used the information collected in that questionnaire, in other words which variables you selected and how you classified the responses.

p.6, para 1. You need to specify that you are dealing with the "one-year period prevalence".

para 4. Please describe your test/retest procedure. Did you do this for all information or only for some information. How did you categorize your answers?

para 5. Did you provide written information to the participants? Did you receive acceptance from some data registry for setting up this register of people?

P.7. It is always a good idea to describe the study sample quite well. For example, age needs to be reported as range (presumably 47-66), spread of data or mean, median etc and to do this both for the base-line and follow-up samples.
Sex distribution, of course, perhaps shown as spread of data. Also, I would expect to have a full report of the variables of interest, i.e. the pain variables, other health problems and what-ever you have used in your analyses. This can easily be done in one table. If there is a significant difference between men and women, these data could be presented independently for the two sexes, if not, reported altogether.

It is also important to understand whether the final study sample is representative of the general population (the target population). Therefore, you should compare 1) your responders at base-line with your non-responders at base-line, in relation to age and sex (which is information that you can get from their personal identification number) and 2) your responders and non-responders at follow-up by use of the base-line data (age, sex, musculoskeletal problems and other health problems), so that we can see who these people are.

Your figure of the various body locations is interesting but I don't think that you do it much justice by just reporting percentages of this, that, and the other. I would strongly recommend that you report these results more on a "visual" basis. As far as I can see, there are several interesting observations to be made. First, the pattern is similar for men and women. Second, it is similar across the different body locations. Third, people tend to report at follow-up in a similar manner to what they reported at base-line. There is an A-shaped curve for all/most possibilities except for the two extremes, that of course cannot go into both directions but only into one direction.

Your figure 2, however, is not very interesting. Why not only mention it, and to test whether there is a difference between the two groups by adding a 95% confidence interval to your percentages or by calculating the odds ratio, with a confidence interval?

Actually, your Table 2, which is very revealing, would be more cited in the literature in the future, I believe, if you also add the odds ratios and you should mention the "dose-response" in the text of your result section.

p.10. I would like to see an intelligent discussion on wht aetiological factors these different conditions could have in common, seeing that they behave in such similar manners.

You will find that the abstract should be adjusted to your amended report, so that it includes a full report on response rates at base-line and followup, that it has the time factor mentioned (one-yr period prev).

I think that you have made an error when you in the Result section, 2nd para list a number of items and join them with the word "and". Surely, this should be "or".

Your last sentence in the Result section is probably illogical and needs reconsideration and rewording. Are you saying that these people's health was "worse" or that there was a larger proportion of people reporting to have bad health? Big difference.

Your conclusion should be re-written to reflect a bit better the major findings and perhaps include the intellectual consequences of these findings.

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

The language needs some minor changes.

p.3. para 1, line 1, in the adult population (add the word "the")
line 5. "have" been sparsely
para 2, line 2. one "phenomenon" - several "phenomena".
line 3 Suggest: "However, it is not known if pain in..... is ......in....."
line 8, Suggest: "For example" at a one-year follow-up...
line 13, "thirty-four"
line 14. Perhaps add the word "survey" after "follow-up".
line 16 .... "will require pain to be present", suggest add the words "to be".
para 3. Why suddenly report on those who "did not", when you previously reported on those who
"did". This makes it confusing for the reader, when he/she tries to compare this info with your
previous examples.

p.4, para 3, line 3 not "weather" (=väder in Swedish) but "whether".
Suggest you continue this sentence "whether pain was localized in one or several body locations".
The word "bodily" sounds weird to me but checking with somebody whose English is perfect.

p.5, para 1, line 1: Epidemiologic study, to make sure that it cannot become epidemiological, at its
worst.
line 2, "All inhabitants........ were"
line 7, "medical" not "doctor" visit

para 3, line 2. "At the one year follow-up study...."

General comment: Why not scrap the decimals when reporting these percentages? On a population
basis, they are not important, and 40% is easier to grasp and remember than 39.8%.

p.10, para 2. Perhaps use another word than "joint" as we are reading about musculoskeletal
conditions. Perhaps "common" is a better word.

para 3. or vice versa, as you have not really tested in which direction the influence goes.

Table 2, "Poor health" change to "poor health"

Fig. 2. Add the word "longlasting"?

Fig. 1b. Use the same legend as in fig. 1a.

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Discretionary Revisions (which the author can choose to ignore)

None. Unless it is to remove Fig. 2.

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

Level of interest: An article whose findings are important to those with closely related research
interests

Quality of written English: Needs some language corrections before being published

Statistical review: No
Declaration of competing interests:

I declare that I have no competing interests.