Author's response to reviews

Title: The course of pain drawings during a 10-week treatment period in patients with acute and sub-acute low back pain

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Author's response to reviews:

Dear Editor,

We have considered the points raised by the reviewers and taken the following actions.

Ketan C. Pande
1. Contradictory statement. A "no" was missing in the text and has been inserted in page 12 paragraph 3.
2. Labeling. New figures with correct labeling are uploaded.

Janet Freburger

General 1. Representation. The study population is reasonably representative of this type of patients, since all patients seen by the health care and known by the only legal health insurance provider were assessed by the recruiting physician. On the other hand, they are not representative for persons with low back pain not seeking medical attention and thereby not claiming sick leave compensation. A short note on this issue have been inserted in the Methods section, page 4 paragraph 1 and the Discussion section page 10 paragraph 2.

General 2. Different course due to treatment. The pain regression course and the change of modality use was the same in all treatment groups, even though the pain regression was inconclusively faster in the experimental group. However, in all groups the main regression occurred during the first five weeks. A short note on this issue has been inserted in the Results section, page 8 paragraph 2.

General 3. Choice of areas. Results for the areas that the reviewer suggests for analysis are shown in Tables 1 and 2. The results of the study were the same whether her or our pain drawing areas were used. Our choice has two advantages. First, we show the whole picture, not only a slice. Secondly, we avoid some of the area borderline classification problems. A short note on this issue has been inserted in the Methods section page 6 paragraph 2.

Major 1. Relevance of objectives. A note on this issue has been added to the Background section page 2 paragraph 5 and page 3 paragraph 2.

Major 2. Validity of change regardless of treatment. See General 2.

Major 3. Design and sampling. See General 1.


Major 5. Ranking of dominance. A note on this issue has been added to the Methods section page 6 paragraph 2 and paragraph 3.
Major 6. Pain and disability measurements. A note on this issue has been added to the Methods section page 7 paragraph 1.

Major 7. Statistics. The subheading has been replaced and a more detailed description of the data analyses have been provided in page 7, paragraph 2.

Major 8. Pain distribution. Due to the lack of consensus on how to report the pain drawing information, data based on several assessment methods are presented.

Major 9. PDS, pain, disability. The assessment analyses were done on data across the study period. A note on this issue has been added to the Results section page 9 paragraph 2.

Major 10. Figure 3. See Major 7.


Major 12. Information moved to methods. We share the reviewer's view but the Methods section is already fairly extensive. For this reason we chose to put as many discussion items as possible in the Discussion section.


Minor 1. Figure 1. See General 3.

Minor 2. Figure 3. The figure legend has been changed in accordance with the reviewer's suggestion.

Minor 3. N's in tables. Group size is provided in the tables. However, we did not insert numbers for each row since this would results in a large number of numbers.

Yours sincerely,
Marie Grunnesjo