Reviewer's report

Title: Testing the proficiency in distinguishing locations with elevated plantar pressure within professional groups of foot therapists.

Version: 2 Date: 18 April 2006

Reviewer: Keith Rome

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General
The article maybe of interest to those clinicians who deal with foot plantar pressures. The manuscript is a continuation of a recent publication by the same authors [1]. The authors have used the same subjects and investigators. Before publication there are a number of points I would like the authors to consider.

Abstract
Re-word ‘in the way they usually do’ to “in everyday clinical practice”.
The results section should include p-values.

Background
Re-word ‘felt-therapy’ to “padding and strapping therapy.”
Re-word ‘shoeware’ to “footwear”.
Reference(s) required after various techniques such as footprints……
Can the authors please explain the ‘amount’ of plantar pressure?
The evidence about 700KPa as the threshold needs to be fully justified.
Sentence about the three patients should be moved into the methodology section.

Methods
The mean of five steps was taken using a platform system. Did the authors eliminate any steps or was it the first five consecutive steps?
How were the regions identified? Current clinical evidence suggests ‘masking’ discrete regions of the foot.
I cannot comment on the statistical tests. I assume the data was normally distributed to use a mixed-model ANOVA. Please explain the principles of Streiner and Norman.
It is interesting to note that the authors decided to accept 0.80 as being acceptable. Previous authors have used a less robust system, where 0.6 is acceptable. For example, Pourtney and Watkins [2] suggest that an ICC > 0.75 is deemed good; between 0.50-0.75 as moderate and <0.50 represents poor reliability. Bruton [3] suggests that an intra-class correlation of at least 0.6 is to be considered useful.

Results
I am unclear of Table 3. Please can explain in more detail the concept of observed proportions of elevated pressure? For example the GS for the big toe is 0.50. What is the SI unit?
Please delete the word ‘sometimes’ and ‘most of the time’ with appropriate scientific language.
The estimated method of agreement (ICC) should include confidence intervals.
Table 4 reports ICC high correlations – 070, 0.64 and 0.78 but you state in the results section that all measures were below the critical level. Please can you explain?
Furthermore, you state ICCs of 0.46, 0.51 and 0.60 – how were the figures derived?

Discussion
I am still unclear on how the data extraction has lead to the conclusion that the big toe is under-estimated? Please clarify.

There is further discussion of the current results in diabetics. The current study only evaluated two healthy older subjects and a further subject with psoriatic arthritis. I am concerned there is too much speculation from the authors about diabetic feet compared to the current study.

Page 6 – first line should be either in the introduction or methodology. Again the study was based on patients with diabetic neuropathic foot ulceration. Does this critical value change considering the type of patients used in current study?

The first paragraph needs further clarification – the statement of 5 instead of 3 feet and false-negative needs to be explained. The authors suggest that other pressure variables maybe important. I suggest to the authors they fully justify the current data of only peak pressure.

The remaining section of the discussion is appropriate.

Conclusion
The authors state no differences between professions - is that a significant difference? If so, please state.
The references are current and up-to-date.

References


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: Yes

Declaration of competing interests:
'I declare that I have no competing interests'