Reviewer's report

Title: A pragmatic randomised controlled trial of hydrotherapy and land exercises on overall well being and quality of life in rheumatoid arthritis

Version: 4 Date: 6 December 2006

Reviewer: Wilbert van den Hout

Reviewer's report:

General

Let my first correct a previous omission: I would like to complement the authors with this paper. I think and thought that the authors intend to make an honest evaluation of the difference between both treatments. I apologize for my third remark, which suggested otherwise.

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

Nevertheless, I still have serious objections against the primary outcome measure and I think its limitations should be more clearly discussed.

1. I strongly disagree that the primary question can be described as “global impression of health”. Patients are asked how they feel after the treatment, which does not explicitly refer to health. After exercise I also feel better, despite feeling unhealthy (i.e. tired and overweight). The difficulty with this measure is that it is unclear what the measured construct is. I suggest using “global impression of change”.

2. The first sentence of the conclusion of both the abstract and the paper should be reformulated, stating that the primary outcome was measured when patients could still physically feel the treatment: “Patients with RA treated with hydrotherapy are more likely to report feeling much better or very much better after treatment than those treated with land exercises.”

3. I apologize for this remark, which unjustly suggested that I thought the authors were led by false intentions. By my remark I meant to rhetorically refer to the type of critical questions I try to teach my students to have in the back of their head.

However, I remain that the paper does not provide a clear justification for measuring the secondary but not the primary outcome measures after three months. The problem of recall bias is now mentioned in the discussion, but not that recall bias is more likely to affect transitional outcome measures (the primary) than status measures (the secondary). This should be included in the discussion.

6. That patients report feeling better is undisputed. Whether they actually felt better depends on the validity of the measure. (In your conclusion and abstract you do use the more prudent formulation.)

Discretionary Revisions (which the author can choose to ignore)

13. The term “co” in “co-morbidity” refers to “other than RA”. Therefore, to me, “other” seems to refer to pregnancy.

16. I do not understand the response. I can only see both sentences as consistent if you consider “self-reported improvement” as not necessarily “relevant to patients”.

17. In my opinion it is not justified to make recommendations in the conclusion of the paper, if you have previously mentioned those in the preceding part of the paper. Moreover, to me it is unclear what you mean by community initiatives.

Page 9, line 11: “change in self-rated …” should be “self-rated change in …”

What next?: Accept after discretionary revisions

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

Quality of written English: Acceptable
Statistical review: No

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