Reviewer's report

Title: Comparison of two measures of physical work load in hospital personnel: A cross-sectional study

Version: 2 Date: 5 September 2007

Reviewer: Alex Burdorf

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)

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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)

1. Abstract: response is (almost) never a rate
2. Abstract: conclusioin, rather confusing sentence, consider to delete the 'rather homogeneous'
3. Introduction: 'yield also smaller risk estimate': not necessarily true, depends also on the relative contribution of patient lifting to the LBP risk
4. Methods: why these two wards ? (implications for findings are that ward characteristics are quite similar to patient handling ?)
5. Physical load: what needs to be addressed is the interrelationship between both measures of load and the relative contribution of patient handling to the calculated overall load
6. Psychosocial load: it is not alwaus clear which direction the score is (higher better/worser ?)
7. Results: the variance analysis was not described in the analysis, how is this done, multilevel for wards ? Also, the residual varaince is not only due to individudal factors (think of patient-related factors etc)
8. Results: table 4, please proviede interrelationship between both measures
9. Results: table 5, statement on POR twice as high, this will depend heavily on the scaling difference and, hence, the need for comparison. Also, note that the twofold difference is not tested for significance (overlapping CI)
10. First para: needs more discussion:
- is compression force the essential risk factor for LBP ?
- do risks of awkward posture and patient handling offset each other to a certain extend due to the choice of two wards
- is the underlying risk of patient handling not only determined by biomechanical load, but eg also due to unexpected force etc

11. Residual confounding: having only two wards will also bear this risk

12. conclusion is too strong since precision seems debatable, CIs around patient handling are much larger than around work load. I suggest to be more careful with this conclusion

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

'I declare that I have no competing interests