Reviewer's report

**Title:** Potential relevance of quality of life questionnaires to identify candidates for surgical treatment of genital prolapse: a pilot study

**Version:** 3  **Date:** 12 January 2012

**Reviewer:** Brett D Lebed

**Reviewer's report:**

I would like to commend the authors on initiating prospective pilot study to evaluate the use of pre and post-operative quality of life questionnaires for predicting improvements in quality of life following prolapse surgery.

**Minor Compulsory Revisions**

Please amend the last sentence of the methods section of the abstract to clarify the timing of follow up.

There are variable surgeries for prolapse utilized in the study, with the addition of the use of slings for stress incontinence as well concomitant hysterectomy, which has been appropriately pointed out by the authors in the discussion as confounding variables. How was the decision made to include sling in the procedure (i.e. clinical stress incontinence, urodynamic stress incontinence, occult stress incontinence)? Clarify whether the five patients who did not have a hysterectomy during the course of the study had previously had hysterectomy.

**Discretionary Revisions**

The PIFq scores of less than 20 indicate people who should not be operated on....

Who are these three patients, and what surgeries did they undergo?

If the PDF7 was broken down into the three sub-questionnaires, did the authors see any preoperative predictive value (i.e. similar to the total preoperatice PDF7 value of 20) from the sub-questionnaire elements?

Short term follow up is a definite limitation of this study. There was a minimum range of follow up of 14 months. Is there data from the 12 month visit for comparison?

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

**Quality of written English:** Acceptable
Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.