Author's response to reviews

Title: The Trends in Prostate Specific Antigen Usage Amongst United Kingdom Urologists, a Questionnaire Based Study.

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Version: 3 Date: 17 March 2008

Author's response to reviews: see over
Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
This is a well conducted study describing the use of PSA amongst UK urologists. The paper is well written and describes a well known everyday problem – clinical practise versus guidelines. Only a limited number of questions or comments arise: 1. The response rate is only 19%. Conclusions are drawn on basis of this limited number of respondents. This should be highlighted more clearly than at the end of page 10 in the discussion section.

In light of the reviewers' comments regarding the low response rate, we have conducted a second round of questionnaires, which has increased the response rate to 47%. The details of the second round have been added to the methods section. We have found that the responses have changed very little. This response rate is highlighted in the discussion at the end of page 11. Changes in the document have been highlighted in yellow.

2. The paper separates the urologists in regions – both only with a few in each region making the comparison between regions inappropriate or with limited value.

Increasing the response rate has increased the numbers in each region, therefore making them more comparable.

3. The authors do not include any statistics for the data in tables 1 and 2.

Statistical data has been added to tables 1 and 2 as requested

4. The paper would benefit from a small appendix including the exact questionnaire used.

I have attached the questionnaire used, which will be an appendix to the manuscript.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
---none--------------------------------------------

Discretionary Revisions (which the author can choose to ignore)
none

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of importance in its field
Reviewer's report
The Trends in Prostate Specific Antigen Usage Amongst United Kingdom Title:
Urologists - a
Questionnaire Based Study.
Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
Of the 961 urologists eligible to participate in this study only 19% (178) returned completed questionnaires. This makes many of the comparisons of doubtful validity e.g. the regional differences in following DH PSA guidelines. The authors do not discuss how this serious limitation affects their findings. How can they be certain that their findings represent what is happening in the UK?

The response rate has been increased to 47% by performing a second round of questionnaires. This is detailed in the amended methods section. All changes have been highlighted in yellow. The increase in response rate does not appear to have significantly changed the results. This suggests that the findings are likely to be representative of UK Urologists, as discussed in page 11 of the discussion.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Discretionary Revisions (which the author can choose to ignore)

What next?: Reject because scientifically unsound
Level of interest: An article whose findings are important to those with closely related research interests
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.
Reviewer: Richard Pocock

Reviewer's report:
Thank you for asking me to review article “The trends in Prostate Specific Antigen Usage amongst United Kingdom urologists – a Questionnaire Based Study”. This article is potentially quite interesting in that it will enhance the debate about what exactly is a normal PSA and the rather surprising lack of awareness of guidelines even among consultant urologists. The article is well written and well researched. The weakness is the lack of response to the questionnaire, a 19% return will not be representative of Urologist views and therefore there will be a major selection bias in the response. This is discussed in the manuscript.

I was surprised that some Urologist were not aware of the Department of Health guidelines and the other interest is the discrepancy between the NHS and the private sector which may represent patient variability but possibly also commercial factors. I think there are aspects of the paper which are of interest and will enhance the debate over the variable views of PSA and therefore you may accept the paper on these grounds for publication despite the weaknesses. However, on scientific grounds the 19% response to the questionnaire means that the paper is not representative and therefore I have to conclude that it should be rejected.

The response rate has been increased to 47% by performing a second round of questionnaires. This is detailed in the methods section. Changes in the paper are highlighted in yellow.

What next?: Reject because scientifically unsound
Level of interest: An article whose findings are important to those with closely related research interests
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