Author's response to reviews

Title: Measuring Melasma Patients' Quality of Life using Willingness to Pay and Time Trade-off Methods in Thai Population

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Author's response to reviews: see over
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BMC Dermatology

RE: MS: 1996820379466084 – Measuring Melasma Patients’ Quality of Life using Willingness to Pay and Time Trade-off Methods in Thai population

To Whom It May Concern:

Please find attached our revised manuscript.

We greatly appreciate the constructive feedback that the reviewers have provided. We have made the changes suggested. Please see the attached document for our response to the reviewers’ comments.

Thank-you again for taking the time to review our manuscript.

Please do not hesitate to contact us if any questions and/or concerns should arise.

Sincerely,

Rungsima Wanitphakdeedecha, M.D., M.A., M.Sc.
RE: MS: 1996820379466084 – Measuring Melasma Patients’ Quality of Life using Willingness to Pay and Time Trade-off Methods in Thai population

REVIEW EDITOR COMMENTS:

Editor requests:

- Please clarify whether informed consent was obtained. Please be sure to provide a statement within the Methods section of the manuscript.

]== We clarified that informed consent was obtained from all subjects participated in this study. Subjects and Methods, Paragraph 1

- Please include a “Competing interests” section between the conclusions and authors’ contributions. If there are none to declare, please write “The authors declare that they have no competing interests.

]== We have added the “Competing interests” section after Conclusions

- Please include an Authors’ contributions section before the Acknowledgements and Reference list.

]== We have added the “Authors’ contributions” section before the Acknowledgements.

- Please revise your Title pages. This should list; the title of the article, which should include an accurate, clear and concise description of the reported work, avoiding abbreviations; and the full names, institutional addresses, and e-mail addresses for all authors. The corresponding author should also be indicated.

]== We have revised the Title pages as suggested.

Reviewer: 1 Comments to the Author

The discussion could be shortened. Table 4 isn’t needed. The information would be presented more efficiently as text.

== We have shorten the discussion and deleted Table 4. Discussion

One limitation that should be noted is that only patients were evaluated, not the general population of people with melasma. Thus, there could be a lot of people
who aren’t bothered by melasma and who don’t come to a dermatologist for an evaluation.

== We have added the limitation suggested.→ Discussion, Paragraph 11. Another limitation about small sample size was also added.

The title doesn’t need to name a particular hospital that many readers may not have heard of. Perhaps it would be more valuable to replace that with “a Thai population”.

== We have changed the title to “Measuring Melasma Patients’ Quality of Life using Willingness to Pay and Time Trade-off Methods in Thai population”.

== Thank you very much for your constructive feedback ==

Reviewer: 2 Comments to the Author

Why not validate an existing instrument specific as Melasqol and try relates it with clinical indices as MASI and facial area affects?

== There are previous studies (Ref 5 and 12) that demonstrated the correlation between Thai DLQI and MASI score; therefore, we assumed that the higher DLQI means higher MASI. We also mentioned this in Introduction. → Introduction, Paragraph 2.

Which the real content of the questionnaire for the evaluation of socio-demographic data, which really was asked to the patient and as was made this analysis. It was not clear.

== We asked each patients his/her monthly salary for the evaluation of socio-demographic data.

Socio demographic data are little discussed, as well as its origin. It seems that the correlation between the DLQI and the standard TTO does not exist and therefore not permanence inconclusive.

Please include some discussion on the socio-demographic data. Please also respond to the reviewer’s comment concerning the correlation between the DLQI and TTO.

== We have added more discussion on the socio-demographic data.→ Discussion, Paragraph 1. The discussion about correlation between the DLQI and the standard TTO was also mentioned → Discussion, Paragraph 4.
The title is long and inadequate.

== We have changed the title to “Measuring Melasma Patients’ Quality of Life using Willingness to Pay and Time Trade-off Methods in Thai population”.

The tables are described in the body of text, this description shall be summarized. The table must have the power to be self-explanatory. Please summarize the description of the tables in the text.

== We have summarized the description of the tables in the text → Results.

The correlation between mean monthly WTP and WTP in terms of relative monthly income were significantly correlated with the total DLQI score, but very low (only 22%). Therefore, I think that these instruments do not reflect quality of life in melasma.

Please respond to the reviewer’s comment that the instruments do not reflect quality of life in melasma.

== We have mentioned the low degree of correlation between WTP and DLQI → Discussion, Paragraph 9.

In relation to DLQI has not been performed internal consistency to check whether the population is homogeneous and the better representative of scores would by median and does not mean.

Please respond to the reviewer’s comment and clarify whether analyses have been conducted to assess the homogeneity of the study population.

== We analyzed the homogeneous of population by calculating Cronbach’s alpha → Results, Paragraph 2.

== We have calculated the median DLQI score and showed it in Table 4→ Table 4

==Thank you very much for your time and understanding.==