Author's response to reviews

Title: Assessment of Quality of care given to Diabetic patients at Jimma University Specialized Hospital Diabetic Follow-up clinic, Jimma, Ethiopia

Authors:

Esayas K Gudina (esakgd@gmail.com)
Solomon Tamiru (solomontamiru@yahoo.com)
Fessahaye Alemseged (fessahayeatd@yahoo.com)
Rana Ram (usctrojan.rana@gmail.com)

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Author's response to reviews: see over
First of all, we all authors are grateful to both the peer reviewers and all involved in processing our manuscript. We understand that our paper was extensive as it involved many research points lammed together in it. Thus, we thank all for taking time to review it and come up with helpful comments. We accept most of the comments and have tried to make corrections accordingly. Some of changes point by point will be given as follows.

1. Most parts of manuscript were extensively edited and re-written.

2. Study question are now well stated in introduction.

3. Method part was re-arranged with new sub-headings according to the comments.

4. Data collection procedures were stated in the method part regarding what were collected by interview, what were obtained from patients chart, how interview was done, who did that, and privacy of the patients. Selection procedures of participants are also stated.

5. Some of the variables that created statistical inconvenience were omitted. For instances, weight was taken for only 68% of patients. It was previously inferred for all the patients and used in the calculation of daily insulin demand. Now that is abandoned.

6. Regarding why HbA1c was not done, the investigators were not involved in doing any laboratory and the findings of laboratory results were solely from patient record. Besides, HbA1c is not generally done in public sectors in Ethiopia.

7. Comparison of most the variables are now done with findings of previous studies in Ethiopia rather than ADA guidelines and western studies.

8. Yes we well agree that there were typographical and grammatical errors in the paper and we feel sorry for that ignorance. Every attempt has been done to reduce that.

9. The phrase ‘attempt for glycaemic control’ in table 3 and elsewhere was replaced by ‘treatment modification.’ It includes life style change, dietary modification, and pharmacologic treatments.

10. Means BP, FBS, and weight were calculated averages of the last three measures. (Stated in the method part)

11. Explanation for each of the abbreviations was given at least once where they were mentioned first.

12. Regarding the issue of life style advice and dietician, no dietician at all in the hospital, probably in the country! Patients were asked whether they attended diabetic health education. Issue of diabetic health education at the hospital cannot be over emphasized due to the fact that it is given, if any, by nonprofessional groups. Explanation is given for this in the ‘setting’ part.
13. Result part is now separated into five parts. Patients’ satisfaction with diabetes care is now added as additional part.

14. Regarding supply of drugs, for most of the patients with chronic illnesses (DM, hypertension, Seizure, etc.), the drugs are given free of charge at the hospital.

15. Number of references was reduced after re-editing the whole manuscript.

16. In the general, all the comments were well addressed and most parts of the manuscripts were re-written. We are ready to take further comments until our manuscript is published and reaches wider audience.