Reviewer's report

**Title:** Older patients' attitudes towards and experiences of patient-physician end-of-life communication: a secondary analysis of interviews from British, Dutch and Belgian patients

**Version:** 1  **Date:** 28 June 2012

**Reviewer:** Christine Ingleton

**Reviewer's report:**

I really enjoyed reading this paper. It is a well written, interesting paper which challenges some of the dominant and idealised notions we hold about the informed decision-making model in the context of older people. It is one of the first studies in this area which I have read which draws upon an existing datasets using qualitative methods across countries in northern Europe. The aims are clear, methods well described and the findings and conclusions are well explicated and well supported. It is good to see the use of existing datasets and synthesis of evidence presented in this way.

1) Minor essential revisions: Page 6: in text reference is made to Table 1 and Table 3, not sure why it is not Table 2? Are they labelled correctly?
2) Page 6: Para 2: could you say a little more about how and what the assessment of the quality of interviews entailed?
3) Page 7: You talk of a sub-sample, what was the size of the original sample. Also, the size of the sub-sample appears under the findings, it would be helpful to have this information earlier under the methods.
4) Page 14: you talk of generalisability; as it is a qualitative study I wouldn't describe it in such a way. Could this be re-worded.

Page 24: Table 2: third from end: you say details provided in Table 2 (this is table 2?).

Discretionary revisions:

1) Would it enhance the paper to articulate what is meant by the dominant 'informed decision model'; i know what you mean but it may help readers have a shared understanding of this concept.
2) Also it struck me that, the focus on information acquisition could be a characterised as a way of engendering hope, rather than of forming a more realistic assessment of future prospects. Some of the participants appeared to be as Glaser and Strauss might suggest in a a state of ‘partial’ awareness ? This finding is contrary to expectations laid out in guidance to doctors in the the UK for example that “patients whose death from their current condition is a foreseeable possibility are likely to want the opportunity to decide what arrangements should be made to manage the final stages of their illness (GMC 2010:).
**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.