Reviewer's report

Title: Multiple sclerosis and palliative care - Perceptions of severely affected Multiple sclerosis patients and their health professionals: a qualitative study

Version: 1 Date: 4 December 2013

Reviewer: Eleanor Wilson

Reviewer's report:

Multiple Sclerosis and palliative care

This paper makes some good points and valid insights. However language needs addressing throughout, there are several sentences that are not clear and would benefit from rewording. Clarification is needed in a number of areas and a definition of palliative care is essential for readers to position these findings within a standardised understanding.

Major compulsory revisions:

Background: I feel the list of things MS patients die from should include respiratory issues and heart disease.

It needs to be clarified in the background and discussion that this study was set in Germany so that comparisons can be made with other countries where palliative care is much more or less widely understood. Reference is made to the UK in the discussion and this works well. This needs to be used to situate the study better – also include in the abstract.

Context and sample: reasons for refusal are not clear – what is meant by ‘missing time’ and ‘missing study payment’

MS patients feeling severely affercter were recruited… ? affected by what?

It is not quite clear how health professionals helped recruitment, I think this just require reworking the sentence to read ‘Health professionals were asked to distribute leaflets about the study and telephone patients directly’.

Were some patients in short or long-term inpatient care?

Were 22 approached and 15 took part? Clarify this

Data collection: I don’t think you need the word ‘expert’ for health professional interviews.

Episodic implies more than one interview with each participant, clarify this sentence.

Line 122 – ‘…conducted within a larger study’ this makes it sound like a separate study or separate part of the study, is this the case or is this just one findings from these interviews and focus groups. This needs to be clear. (the next sentence also does not make sense)

Results: Labelling for quotes does not mean anything to the reader, these should
be relabelled to indicate a pseudonym, type of interview and category of participant

Unclear what is meant by ‘quality human terminal care’

Discussion: Social worker for example talked about neurological units and nursing homes as appropriate places for managing people with MS. I think it should then be queried whether these places are delivering palliative care for people with MS but just not recognising the label? The doctors then talk about delivering palliative care anyway – this all gets rather unclear as they then refer to palliative care units. The authors seem to be switching between generalist palliative care and specialist palliative care units. There needs to be a clear definition of palliative care provided for the purposes of this paper. Without this it is difficult to place any of the findings in context.

There is then switching between hospice and palliative care. This discussion needs some reworking to clarify these points.

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

**Quality of written English:** Needs some language corrections before being published

**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