Reviewer's report

Title: Assessing performance status in palliative care: a version of the Karnofsky Performance Status scale for the twenty-first century

Version: 1 Date: 10 August 2005

Reviewer: Florian Strasser

Reviewer's report:

General
This very nice paper tested as a part of a bigger trial three different measures for performance status for their acceptability and reliability in the palliative care setting and different care contexts. The methodology to measure the three PS scales was done well including clear instruction of the nurses. The statistical part is nice too.
I sincerely hope this review will assist to further improvement of this very well done paper from an excellent trial and thorough study group.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Major issues
Please emphasize more, why the AKPS is really an innovation in Palliative Care in the new century. The data presented convince with regards to better correlation with measured survival in patients at the lower ranges of PS. However, is this relevant in clinical care? The authors correctly cite, that often decisions are made about delivering care or not based on KPS. It is a valid hypothesis, that the AKPS will 1) perform better to assist decision making, and 2) its use will be better than the other PS scale comparing different settings, typical for palliative – and not exclusively cancer - care. Point two was only tested by face validity of the nurses indifferent settings. The paper would profit to provide these two informations, or if not available, from a more careful wording of the title, running title, discussion, and mainly the conclusion.

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

Minor Issues
- Tables and figures
  . Please shorten the presentation of statistical analysis considerably (too many data, while lacking issues as discussed above. Please use less precise numbers after the semicolon).
- Background:
  . the first sentence states an important development, but the reference is a self reference and from a manuscript honestly declared as still in review process (formally status submitted)
  . the expected goals should be written more precise: 1. predictive value for what in the settings mentioned? I suspect for survival, then it is prognostic value, of really predictive, than maybe for the decision to care for the patients in a certain setting, see major issue.
- Methods.
  . in the study setting the word supportive care is mentioned, what does it mean in this context (sorry to ask, but the quality of the paper is too good, to leave this question open)
  . Ethics approval: trial registration is already mentioned, duplicate information.
Discretionary Revisions (which the author can choose to ignore)

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

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

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:
I declare that I have no competing interests