Reviewer’s report

Title: Factors associated with multiple transitions in care during the end of life following enrollment in a comprehensive palliative care program

Version: 1 Date: 3 February 2006

Reviewer: Amy P Abernethy

Reviewer’s report:

Thank you for the opportunity to review this manuscript. It is a nice paper on an interesting topic in palliative care health service delivery. I commend the authors for maintaining and querying their database; this is an important evaluation and feedback mechanism that should be adopted in palliative care more broadly. This manuscript should ultimately be published, however will first need major revisions in order to deal with the items below, especially data quality, relationship to distress, and generalizability.

Major Revisions:

The authors do not provide any information about the data quality in the PCP database. Hence, it is difficult to evaluate the merit of the findings. Who is entering data? What training have they had? How confident are we that the people entering data know the correct diagnosis, location of care, etc? What is the frequency of missing data? Are there double data entry? Does the database have background validation parameters? What is the security and are data de-identified before analyses? Did the IRB or Ethics Committee approve this analysis? In other words, how can we be sure that the database reported here is complete, reliably represents transitions as the authors define them, and maintains the integrity of patient confidentiality?

The authors do not present any evidence that transitions cause distress? Further, they define transitions as a change in location or a change in service. Why this definition, and how is it causally related to distress? The most obvious concern is the definition of distress being defined by change in care from PCP to NSCC – is this necessarily a bad thing?

In reviewing results, there are the different transition periods and then the associated predictors for each transition. It started to get confusing how they all lined up, especially given the multiple levels of each characteristic in the model. A figure with predictors at each time point including similarities and differences would be useful. This figure should also include a representation of the mean/median number of transitions in each of these periods.

What about the influence of local effects? For example, might the differences found for women really reflect local culture, health system issues, and norms? Is this really generalizable? In fact, much of the discussion points to the importance of various factors that are really local issues and not necessarily applicable outside of the PCP catchment area. How should readers interpret these? How should they apply this new knowledge more broadly?

Minor Revisions:

Abstract – Background sentence #1 suggests that this paper might be about home caregivers, but in fact it is about clinical caregiving. This sentence should be reworded so that the correct context is set.
Writing style – long sentences that need to be broken up with periods, not commas. This is especially noticeable in the background section.

PCP – What is the length of stay, # of referrals per year, % cancer for PCP. This should be noted in the methods section.

How did this population look in comparison to all patients referred and admitted to PCP? What proportion did this population represent (were there missing data? were some groups were eliminated?)? How closely does the PCP population pre-2002 represent their population now?

There is an important body of literature that is inadequately referenced in this paper. For example, the difference between cancer and non-cancer trajectories is not referenced in the discussion section. There is a body of literature about database studies that would help the authors.

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

Level of interest: An article of limited interest

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

Statistical review: No

Declaration of competing interests:

None