Reviewer's report

Title: In the shadow of bad messages - Reactions of patients with acute leukaemia, myeloma or lung cancer to bad messages in different phases of their disease.

Version: 1 Date: 10 July 2006

Reviewer: Linda Emanuel

Reviewer's report:

General

The English language use is not smooth.

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

Abstract: The four categories of patient responses are not intuitive so the reader is perplexed rather than intrigued. The conclusion does not seem to follow and the practical implication is also somewhat indirect.

Background: The description of what this study adds is not reflected in the findings reported in the abstract or text. The description also seems to presume the conclusion that coping through information is the predominant response to bad news. This seems predetermined and also so narrow (the stated goal of the study is broad) as to be unlikely as the full finding.

On returning to this section after reading the full paper it is apparent that the study goals are broad, including coping mechanisms through three stages of terminal illness, yet the analysis focuses on a defined population of terminal patients' information preferences. The authors should recast the study as such.

Methods: What is an 'obvious mental imbalance'? Usually use of a standard scale such as MMS or ability to complete informed consent meeting criteria of understanding is used. The present standard, being apparently in the hands of the individual interviewer, seems too subjective and discretionary.

Analysis: Was there any software used? Was there any attempt to achieve inter-rater reliability on coding?

Results: The phases and the four categories of information management do not seem to connect. The observations during the second and terminal phase seem almost random.

Discussion: To start with a presumed assertion by the reader of the study limitation and a defense of it just makes the author seem defensive. The norm is to put the study limitations at the end of the discussion in a straightforward way. All studies have limitations; it is usually better to avoid trying to defend against them.

The switch to the first person in the second para seems odd.

Practical implications: There are many practical implications, so to settle on the need for continuity of physicians among all the possibilities seems 'out of the blue.'

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

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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: Needs some language corrections before being published

Statistical review: No

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