Reviewer's report

Title: 'Palliative care': a contradiction in terms? A qualitative study among cancer patients with a Turkish or Moroccan background, their relatives and care providers

Version: 4 Date: 28 May 2010

Reviewer: Jocie Ellis

Reviewer's report:

Proposed decision: Major Revisions

Re- review comments for authors:

This is an interesting paper that explores the concept of “good” palliative care in Turkish and Moroccan patients and shows how this conflicts with the concept “good” palliative care that underpins the practise of Dutch health care providers.

In response to the reviewer’s comments more information has been provided in the background section with regards to other studies that focus on Turkish and Moroccan patients. This helps to contextualise the study and also helps to justify the needs of the study. Greater justification is also provided as to why patients from these particular backgrounds were chosen for the study. The authors also provide details regarding the source(s) of ethical approval. The authors were asked to provide a reference which supports the use of oral consent. However, although the document outlining the response the reviewer’s comments states that this has been provided has appears to have been crossed out in the revised version. This needed to be corrected.

The information regarding the research population is still confusing and whilst the tables are much clearer than those provided in the original paper the figures presented in the table 1 still do not add up to those in the text. For example, in the text it states that 65 people were interviewed, yet further down in the text the authors state that five males and 25 females (family members), 47 care providers and 6 patients were interviewed (making of total 83). The figures in the table 1 total 83 (6 patients, 29 family members and 48 professionals –but the breakdown does not match that presented in the text. In addition the tables would benefit from a key to explain the abbreviations used (e.g. Ma; Tu). It is also suggested that the question marks be removed in table one as these are not necessary.

More detailed information has been provided regarding the questions asks during the interview although it is still not clear as to whether an interview schedule was used. Also the paper is still not explicit about the theoretical and methodological frameworks of the study, although a more detailed description of the analytical process is provided which to some extent enhances the credibility of the study.

Regarding the findings, there still needs to be a short discussion related to the overall themes of the study. This will help to put what appears to be the main finding of the study into context with the broader findings. In terms of the
discussion, there still needs to be more discussion of the findings in relation to the literature, particularly in terms of the implications for care provision for patients from these particular ethnic backgrounds (only one new reference was provided in this regard).

The results are clearly very interesting and in my opinion would help to broaden our understanding of what is perceived to be ‘good palliative care’ in these different cultural contexts. The conclusion is much improved and is now more explicit as to what the findings mean for practice in this area. However, although the paper is much improved in my opinion it still needs further revision it is to meet the standard required for publication and there is a need to insert a couple of missing words. There are also no limitations of the study stated (which I omitted to state in my original review).