Reviewer's report

**Title:** Mammography screening: views from women and primary care physicians in Crete

**Version:** 2  **Date:** 12 May 2008

**Reviewer:** Donna K Ciliska

**Reviewer's report:**

I have been asked if the authors have responded adequately to the comments of Reviewer #2. My comments are included under R#3 below.

r 2:

1. Is the question posed by the authors new and well defined?
   It will be helpful if authors can state the research questions clearly and also provide a list of the questions they used in the interview.

   Response: Many thanks for your comment. We have added the research questions (page 6) and we have provided a list of the questions that we used in the interview (additional files 1, 2).

   R#3: Research questions are clear; interview schedule is attached (extra file).

2. Are the methods appropriate and well described, and are sufficient details provided to replicate the work?
   The research method that authors selected is an appropriate one, however, the authors did not provide adequate details for data analysis (of interview data). Also, the way that the results presented is not the traditional format reporting for qualitative data. If the analysis was done using content analysis, then the authors need to present the themes and how the themes were identified, it needs to be clearly described in the analysis.

   Response: Thanks again for posing another interesting question. MT commenced the process of analysis coding the data and then grouping the themes into categories. Thematic coding was for themes in the interview schedule and through inductive analysis themes arising from data. We have clarified this process on page 9. Themes and categories are in Box 1.

   R#3: This method is a qualitative descriptive study and does not follow any particular qualitative paradigm. Process of analysis is just minimally described. I do not think that Box 1 adds much to the understanding of the analysis.

3. Are the data sound and well controlled?
The authors used a convenience sample and how the sample selected was not clear. It is also questionable how the results can be generalized to the population in Crete.

Response. a) The sample were selected from the list of regular appointment at each Health Center. We have clarified this on page 7.

b) The present study tested a small number of women and there are some concerns to what extent they can be generalized. Rural Cretan women who visited participating primary care practices were more likely to be older and have less post-school qualifications compared with rural women of Greece. There was no indication that our sample differed in terms of culture and language from other rural Greek populations. We have clarified this on page 25.

R#3: This is now adequately clear.

4. Does the manuscript adhere to the relevant standards for reporting and data deposition?
The results section needs to be improved. The demographic table should include the aggregate data instead of individual data.

Response: We changed the demographic table include only aggregate data in the revised manuscript.

R#3: Results section is minimally adequate – scanty information, short quotes.

5. Are the discussion and conclusions well balanced and adequately supported by the data?
Overall, the discussion was well written. Several important issues came up related to data collection, including why the authors did not explore more (during the interview) in specifics of what kind of mammography women participants were referring to, i.e., screening vs. diagnostics. The barriers may be very different with the purpose of the screening.

Response: Both, physicians and women were asked about screening mammography and it is clear that physicians were correctly responded to the relevant questions. There is unclear to us whether all the participating women had the same understanding about the difference between diagnostic and screening mammography. Although it can not alter the main findings of the study it is include among the study’s limitations. (Page 25, paragraph 2)

R#3 this has been addressed

Also, it will be interesting to compare the differences and similarity between the perceptions of women's and physicians perceptions on the same question, e.g., barriers to mammography and how the intervention can be designed using such findings.
Response: Many thanks for your comment. The interview schedule was different for the two groups. But there were similarities that we have added at the results section (Page 22).

R#3 – done

Also the findings will be strengthened if the findings can be presented corresponding with women’s demographics. For example, women who report the absence of symptoms as a reason for not having mammography, are these responses from women who had or not had mammogram in the past or are these responses are from older vs. younger age groups, etc.

Response: where relevant we have added text throughout the results section about the women to address this. Thank you.

R#3: Done

6. Do the title and abstract accurately convey what has been found? Yes

7. Is the writing acceptable?
It needs editorial assistance to improve the readability throughout the text.

Response: We checked again the revised manuscript, the grammar, syntax and linguistic errors and we hope it has improved its readability.

R#3: Adequate

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

**Quality of written English:** Acceptable

**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