Author's response to reviews

Title: Prediction of breast self-examination in a sample of Iranian women: Application of the Health Belief Model

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Author's response to reviews: see over
Dear Editor in Chief
Journal of BMC Women’s Health

Article: Health Belief Mode constructs as factors associated with Breast Self-Examination behavior in a sample of women in Bandar Abass, Iran

Reference number: 5348333262464961

Version: 3

Thank you for the opportunity to re-revise our manuscript, reference number as 5348333262464961. Attached, please find the responses to the reviewers’ reports on the manuscript.
It would be most appreciated if you consider the answers to be reviewed.
Also the quality of the English of the manuscript has been improved.

I sincerely thank you in advance.

Reviewer's report

Title: Health Belief Mode constructs as factors associated with Breast Self-Examination behavior in a sample of women in Bandar Abass, Iran

Version: 3 Date: 7 May 2009

Reviewer: Nursen O Nahcivan

Reviewer's report:
Title: Health Belief Mode constructs as factors associated with Breast Self-Examination behavior in a sample of women in Bandar Abass, Iran
This version of manuscript seems much improved but is still not reached a publishable standard. My comments are below. I hope this comments are helpful for the authors.

Major Compulsory Revisions
1. Page 3, last paragraph, the authors state that “Despite the well-known benefits of BSE, studies indicate that the rate of breast cancer screening test like BSE is lower than expected”, but no reference is presented for this assertion. Is BSE presumed as a breast cancer screening test?

   - This sentence was improved and the reference number 17 was presented for that.

2. Page 5, second paragraph, what do the authors mean when they write that “in this study the health motivation subscale was not used because this variable is not a separate construct of HBM (21, 24)”? It is not clear for the readers; please rewrite the sentence in a more clear way.

   - This sentence was re-written as recommended.

2. The term of BSE measure is still confusing due to response categories. For example, why did the authors label the BSE measures in different forms such as performing/not performing? performers/non performers? BSE practising/ never performed? With and without BSE behavior? Which one is preferred? Also, the authors mention that “BSE has been considered REGULAR if it had been done one time per month for at least three months (n=17) ”, and “BSE has been considered IRREGULAR if it has not been done monthly or been done less than three months (n=59) ” in Table 1. Later, authors refer to perform BSE behavior as yes (n=76, regular and irregular) and no (n=164, never doing). Therefore;

   - The response category for BSE measure was uniformed in tables 1,2 and 3.

a. Page 9, third paragraph, the interpretation is misleading. “The results of this study showed that participants who performed BSE monthly, perceived more BSE benefits, less BSE barriers and more BSE self-efficacy than those who did not this behavior on regular (?) basis.”
b. Also, in the abstract, the sentence “Perceived benefits/ barriers and perceived self efficacy of the studied women who performed breast self examination regularly (?) were significantly higher than those who did not it(?) (p < 0.03)” should be corrected.

- This sentence was improved in the abstract.

**Minor Essential Revisions**

1. The title: The words “Bandar Abbas” should be removed from The title sentence. The word “mode” should be corrected as “model”.

- This was done as suggestion.

2. The words “Bandar Abbas” ? Bandar Abass? should be rewritten in correct style in the text.

- This was re-written.

3. Selecting every tenth women is not selected at random. I think the word randomly should be removed from the description of the sample selection process.

- The word randomly was removed from the description of the sample selection process.

4. Page 5, in Third paragraph, There is a spelling mistake in the words “Sebahat and Ilknur”.

- This was corrected.

5. In table 1: only the education level of “primary , secondary , university” are written. But “high school” or the education years of “9-11 years” should be added.

- This category was added in table 1.
6. There are spelling errors in the references 26 and 27. These should be corrected.

- These were corrected.

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

**Quality of written English:** Not suitable for publication unless extensively edited

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

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

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**Reviewer's report**

**Title:** Health Belief Mode constructs as factors associated with Breast Self-Examination behavior in a sample of women in Bandar Abass, Iran

**Version:** 3  **Date:** 8 May 2009

**Reviewer:** Paul Norman

**Reviewer's report:**
Overall Comments:
The manuscript reports an interesting study applying the Health Belief Model (HBM) to the prediction of breast self-examination among Iranian women. The manuscript is likely to make a positive contribution to the literature given that are no other HBM studies on
BSE in Iran. In addition, the relatively large sample and the use of Champion’s HBM scale are positive features of the study. The authors have made a number of changes to their manuscript in response to my comments on the original submission. These have addressed most of my concerns. However, there are still a few points that still require attention as detailed below.

**Major revisions:**
The manuscript would benefit from further copy-editing. There were too many minor grammatical errors for me to list.

- This manuscript was more edited by an English speaking language author.

The description of the BSE measures still lacks detail – this needs to be reported more precisely given that BSE performance is the dependent variable.

- This description was added in method section.

Were there any differences in BSE performance according to age, education and history of breast problems? These results need to be reported in the text.

- These results were reported at the first paragraph of Results.

It’s not clear why age and education are included in the logistic regression analysis but history of breast problems isn’t. One option would be to only include those that are significantly associated with BSE performance or, alternatively, to include all three variables.

- Further logistic regression analysis was done and all three variables were included, so table 4 revised accordingly.

**Minor revisions:**
The title doesn’t appear to have been changed. It would be better as “An application of health belief model to the prediction of breast self-examination in Iranian women” or “Breast self-examination in Iranian women: An application of health belief model”
• The title was changed as suggested.

There’s no need to provide such detailed information on the demographic profile of the women in the abstract.

• This section was briefed.

The information on the incidence of breast cancer in Iran in the introduction could be reported more succinctly. In addition, further information on applications of the HBM to the prediction of BSE could be provided. For example, which HBM constructs are most strongly or most consistently associated with BSE performance?

• This information was added into the introduction according to recommendation of other reviewers. They wanted more detailed statistics about breast cancer status in Iran. Yet, In Iran, there are no documents about BSE in which HBM and CHBMS were applied.

The method would benefit from the use of more sub-headings to structure the material.

• This was done.

It is not immediately clear from the text on page 5 that the comparison reported in Table 2 is between BSE performers (regular and irregular) and non-performers (never). This needs to be stated more clearly.

• This was corrected in text and table 2.

The reporting/interpretation of the odds ratios in the text could be clearer.

• These descriptions about the constructs of HBM (table 4) which are significantly associated with BSE performance, were added in the first paragraph of page 8.
Table 1. The meaning of the second table note is very unclear.

☐ This was improved.

Table 2, 3 and 4. p = .000 should be reported as p < .001.

- This was improved.

Discussion.
Page 9, paragraph 3. The first sentence is technically incorrect as the BSE group consisted of regular and irregular BSE performers.

- This was corrected.

Page 10, final paragraph before the conclusion. There doesn’t appear to be a strong case for suggesting the use of factor analysis given that the scales were found to be reliable in the present study.

- This paragraph was added according to recommendation of other reviewer.

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

Quality of written English: Not suitable for publication unless extensively edited

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
Reviewer's report

Title: Health Belief Mode constructs as factors associated with Breast Self-Examination behavior in a sample of women in Bandar Abass, Iran

Version: 3 Date: 23 April 2009

Reviewer: ilknur aydin avci

Reviewer's report:

this article is suitable for publication after revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report

Ok. Thanks

Best Wishes

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