Reviewer's report

Title: Diagnostics and interventions in complementary and mainstream medicine

Version: 1 Date: 22 October 2009

Reviewer: Merrijoy Kelner

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Major Compulsory Revisions

The manuscript is entitled Diagnostics and interventions in complementary medicine and compares the diagnostics, visit length and interventions of complementary practitioners with those of general practice physicians in Holland. The question posed by the authors is an important one and has not received much attention in the literature, although the authors do not seem to be familiar with some of the work that has previously been done on this topic. (See for example, Kelner, 2000, The Therapeutic relationship under fire, in Complementary and Alternative Medicine: Challenge and Change, Harwood academic publishers).

The paper requires considerable work, however, before it can be considered for publication.

In the first place, the paper lacks a theoretical framework and is not grounded in the literature on complementary medicine. For example, the last sentence in the first paragraph suggests that it is important to find out what CM physicians actually do, but makes no reference to the literature on the efforts of conventional medicine to protect its jurisdiction against intruders, or to the current emphasis on evidence-based medicine. The role of the state in protecting the interests of conventional medicine (See the work of Donald Light) is not mentioned, nor is the importance of carving out a niche within the health care system (See the work of Anthony Abbott, 1989). A much fuller discussion of the relationship between conventional medicine and complementary medicine is required at the outset of the paper.

All the way through the paper, critical citations are missing. For example, when discussing the idea that extra time spent with patients is a factor in patient satisfaction, no citations are offered, even though there are many articles dealing with this notion.

The methods used in the paper are poorly reported and unclear. The way patients were recruited is not fully explained. The registration forms and procedure are mentioned but not developed in a way that enables the reader to understand the process of recruitment. The authors say they are using multilevel analysis but the statistics are reported in percentages, which do not require that kind of analysis. The first two lines under the heading Statistical Analysis on P5 are confusing and difficult to understand, making it impossible to assess whether
the analysis had been correctly carried out. Indeed, the lack of clarity about the methods makes it hard to accept the validity of the findings.

The discussion section suffers from lack of reference to other work in the area, particularly in the last para on p8, where it talks about reasons for consulting CM practitioners---there are many scholarly articles dealing with this subject. Further down in the same para, the authors refer of issues of health care policy and expenditure. This requires considerable expansion in order to make any sense.

Considering that the first language of the authors is not English, the language is more or less acceptable, although I would recommend a review by a good English editor before the next submission.

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

Declaration of competing interests:

I declare that I have no competing interests