Reviewer’s report

Title: Diagnostics and interventions in complementary and mainstream medicine

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Reviewer: Lesley Wye

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Review of: Diagnostics and interventions in complementary and mainstream medicine by Phil Heiligers, Judith de Groot, Dick Koster and Sandra van Dulmen
BMC Complementary and Alternative Medicine

This is an interesting paper that looks at the differences between the presenting conditions of clientele, visit lengths and interventions of mainstream and complementary therapy physicians. The research questions are well-defined and the methodology is appropriate. I would recommend that this paper is considered for publication after major amendments.

Major amendments:

The strongest aspects of the paper focus on differences in patients’ presenting conditions and visit lengths. The weakest aspect is around interventions. For example, in the abstract although it is stated that the authors looked at interventions, and this word appears again in the conclusion, there is nothing in the results section about interventions. In the main body of the paper, ‘interventions’ are not defined and there are no data presented in any of the tables about mainstream interventions for comparison. Furthermore, the third paragraph of the discussion section seems to conclude that CM physicians are different from mainstream physicians because CM physicians use CM techniques (e.g. vega testing etc.). But isn’t that to be expected? Because there are so little data available to compare interventions used by CM physicians and mainstream physicians and concept is not well defined, I would suggest that the authors cut the intervention aspects from this paper and consider writing a further paper focusing exclusively on the differences in interventions across the different types of CM physicians. If the authors take on board this suggestion, then the rest of the paper will be much stronger as they will coherently be comparing CM and mainstream physicians throughout. They will also have to change the title of the paper.

A second major point is that although I appreciate that English is a difficult language and overall the authors do very well, throughout the paper the grammar and word choice is slightly off. For example, in the second paragraph of the background section of the main body of the paper, the authors write “According to RDMA, it is at all times physician’s responsibility to emphasise the importance of mainstream treatment.” This should read, “According to RDMA, it is a physician’s responsibility to emphasise the importance of mainstream treatment.”
at all times”. Examples of incongruence in word choice include ‘intake’ for ‘initial consultation’ (intake in the UK is used for acute hospital patients who stay in hospital) and ‘diagnostics’ for ‘presenting condition’. In fact, as I understand it diagnosis and presenting condition can be very different; for example a presenting condition to an acupuncturist might be hot flushes but the diagnosis is insufficient kidney qi. I think throughout the paper, the authors are actually talking about presenting conditions not diagnoses. I would suggest that as part of the revision of the paper, the authors ask a native English speaker to read and correct the paper.

Minor and discretionary points:

1. In the background section of the main body second paragraph second sentence (number of physicians who specialize in CM is growing), a reference is needed.

2. Background 3rd paragraph sentence beginning “However, if no large differences exist in diagnostics...patient attend CM physicians primarily for a second opinion or for getting advice from a different angle.” Is this the authors’ supposition or does it come from the literature? If the latter, it needs a reference. If the former, this needs to be stated more clearly as a supposition.

3. Box 1 – fytotherapy – isn’t this phytotherapy?

4. In general in the background as many readers (such as I) will be unfamiliar with the Dutch system, it would be helpful to have more background. Specifically, I’d like to know more about the literature on complementary therapy research in the Netherlands and how CM physicians differ from mainstream physicians. For example, has there been any qualitative research done into complementary therapies in the Netherlands? How do CM physicians become CM physicians? Is it like the UK where you can be a medical acupuncturist after a weekend course? Is there any info on the proportions of mainstream physicians who study homeopathy, acupuncture and naturopathy? Is the non-medical practice of any of these therapies illegal? How do CM physicians get their referrals? Self-referrals or from other doctors? Do patients have to pay to see CM physicians and/or mainstream? Any further information the authors can provide to flesh out the context would help readers to better understand their findings, as the aim is to understand the differences between the two types of phycians.

5. Methods – the sampling and recruitment of CM physicians is well explained. The paragraph on ‘procedure’ could be fleshed out more with an explanation of ‘new’ patient. Were there any exclusions e.g. children, previous patients who were returning with the same (or different) complaint after a treatment break? Or did they recruit every consecutive patient regardless?

6. Methods mainstream data – is this available to any researcher? How did the this study’s researchers receive it? Was it in raw form that they themselves could work with or was it published in a pre-determined format? How closely did the study authors work with the mainstream data researchers? When and how and who collected the original mainstream data?

7. Methods – stats analysis. I can’t comment on the statistical analyses because I
am not a statistician. However, the following did not make sense to me: “As patients are using the same physician are similar with regard to their physicians characteristics…” Does this mean that the patients are similar to other patients of the same physician or does it mean that the patients are similar to the physicians.

8. Results – I don’t understand the 1st paragraph 2nd sentence beginning “sixty percent of the participating CM physicians was male, which referred to the majority of males among participating homeopathic and naturopathic physicians…” I think the confusion is augmented because data on characteristics for patients and physicians are both presented in this paragraph. I think it would be better to have the data on the physicians first. And then in a new paragraph present the data on patients – with more data.

9. Results section on interventions - need to state what the top 5 interventions were, as well as directing readers to Table 4. (but if interventions bit is cut, ignore this)

10. Results – visit length. Need to give data in text to support statement e.g. repeat visits in acupuncture were longer than in homeopathy.

11. Discussion – I wasn’t wholly satisfied with the limitations section as it seems to me that amongst the biggest limitations of this study are that the mainstream data are from 2001 (not sure if that’s when the data were published or collected) and the data from the CM physicians dates from 2008. So there is quite a gap.

12. Conclusions – the last sentence of the conclusion is over wordy and confusing. More importantly, I really didn’t get what the key message of the paper is, other than – The work of CM and mainstream physicians is different. There was some attempt to answer the question of ‘so what?’ by discussing the differences in consultation time, but I think this needs to be stronger.

13. Acknowledgments – no acknowledgments to the study physicians or patients??

14. Tables – Table 1 – Is this really necessary as we could have all of these data in the text and some of it is repeated in other tables? Table 2 & 3 – I feel somewhat uncomfortable being told that something is “statistically significant” yet the p values and confidence intervals are not presented so I can’t see that for myself. Also there are too many footnotes, some of which are not necessary (e.g. we can assume that female genital presenting conditions refer only to the female population!). Also the authors need to make sure that all the lines in the tables are aligned. Perhaps they would be better off with the tables presented in landscape, so as to include p values and other types of information.

Lesley Wye
26 October 2009

**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.