Author's response to reviews

Title: Differences in the quality of interpersonal care in complementary and conventional medicine

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Author's response to reviews: see over
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Resubmission of an article to BMC Complementary and Alternative Medicine

Dear Sirs

Thank you for reviewing our paper entitled „Differences in the quality of interpersonal care in complementary and conventional medicine” submitted for publication in BMC Complementary and Alternative Medicine.

We revised the paper according to the comments of the reviewers. The following manuscript changes were made:

Reviewer Aslak Steinsbekk

Major Compulsory Revisions

We changed the description of the study design and renamed the study a comparative observational study.

The introduction of the article was almost completely rewritten and additional information on the background of the study and a legitimation of the applied methods is given. Multiple references were added in this context.

Tables were completed with results of statistical tests and odds ratios are provided in the text and in the table with the EUROPEP data.

We added a paragraph providing a rationale of using a one month follow-up period in the methods section and we also provided an explanation of using a model with only age and gender as additional cofactors in the statistical analysis. (section Limitations).

We performed several procedures to ensure generalisability of our results by performing a responder statistics and a comparison of our data with various other comparable sources information. A summary of the responder statistics is given in the text (second paragraph of the
results section) but we are reluctant to provide an additional table with these data as there are already 6 Tables included in the article.

The lack of references to studies comparing results between CAM and conventional practitioners is most likely explained by the fact that this study neither focused on a specific discipline of CAM (such as homeopathy) nor on specific patient populations (i.e. chronic patients) nor aimed at specific indications. There is in fact a lack of such studies of CAM as whole from a health systems perspective. A similar issue also refers to a comment made by the reviewer with respect to an earlier publication of our group (Marian et al.). This earlier study was focused exclusively on homeopathy and was based on a subsample of the full dataset as used in this study (including multiple CAM disciplines). This explains the different sample size of the two articles.

Several changes in the text were made to comply with discretionary revisions recommended by the reviewer.

**Reviewer Fuschia M. Sirois**

**Major Compulsory Revisions**

We completed the introduction of the article with the issues recommend by the reviewer (see also comments to Aslak Steinsbekk).

We also added a paragraph addressing the issue that expectations are a function of use and experience with CAM (page 16).

**Reviewer Richard Nahin**

**Major Compulsory Revisions**

Western herbal medicine was included in the study although an evaluation was not required by the respective federal legislation. The methods section was formulated more precisely in this context. The decision to include Western herbal medicine in the project was the result of intense lobbying of the related professional association.

Sampling days were chosen within season at random, the manuscript was changed accordingly.

The choice of a three week follow-up was explained and we also justified the use of a parsimonious statistical model (see comments to reviewer Aslak Steinsbekk)

A paragraph was added to the limitations section describing the controversy about adjusting for multiple comparisons in the statistical analysis.

We added a sentence in the methods/data analysis section describing model fit procedures. We are, however, reluctant to add this information for each individual test as this would inflate the already large amount of numbers in this article in an unreasonable way. For the same reason we refrained from providing additional confidence intervals (which would not add to the information when p-values are stated).

We added p-Values and Odds ratios at multiple places in the text and completed table 6 with odds ratios.

We provided a rationale of dichotomizing the categorical data into the best possible and all other answer options in the limitations section.
Minor Essential Revisions

We changed the term perceived efficacy with patient reported outcomes

We also added a sentence in the methods section that the ethics committee of the Canton of Bern raised no objection to the study. All changes in the manuscript are made visible in a accompanying document (interpersonal_effects_4_rev.doc)

We now resubmit the article for your consideration to be evaluated by the committee of reviewers.

We look forward to your thoughts and comments regarding this article.

With best regards

André Busato