Author's response to reviews

**Title:** Dietary supplement users vary in attitudes and sources of dietary supplement information in East and West geographic regions: a cross-sectional study

**Authors:**

Mary R Rozga (rozgamar@msu.edu)
Judith S Stern (jsstern@ucdavis.edu)
Alexandra G Kazaks (akazaks@bastyr.edu)

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**Author's response to reviews:** see over
To Whom It May Concern:

Thank you for the opportunity to revise and re-submit the manuscript *Dietary supplement users vary in attitudes about usage and sources of dietary supplement information in East and West Geographic regions: a cross-sectional study* to *BMC Complementary and Alternative Medicine*. In this article, we discuss the differences in usage, attitudes, and sources of information of dietary supplements (DS) according to geographic location, thus providing novel information about how these factors vary according to geographic setting. Additionally, the authors present data on perception of DS essentiality to health and degree of confidence in choosing an appropriate DS. We document and discuss the trend toward higher participation of the conventional health care provider in patient DS usage.

I would like to thank Dr. Cartmel and Dr. Mehta for their insightful reviews. Their suggestions and concerns were carefully considered and addressed as follows:

**Abstract**

- Minor language revision was addressed.

**Background**

- Minor revisions were addressed including addition of a time frame for the NCHS, addition of rising medical costs (with reference) as a reason for DS usage, addition of a reference for a 2007 survey discussed but not cited, and modification of the study objective to enhance clarity. Language was altered to ensure consistency of the definition of DS.
- Dr. Mehta expressed concern that the FDA regulates DS, though, in the Background, the authors claim that the FDA does not. The differences in opinion stem from the fact that the FDA does not require proof of safety or efficacy prior to production or marketing of the DS, but the organization does investigate consumer concerns after the product has been on the market. This is clarified in the text with Dr. Mehta’s suggested reference that describes this point.

**Methods & Results**

- Dr. Cartmel suggested inclusion of additional comparisons for dietary supplement (DS) usage and attitudes. Anthropometric measurements were collected, and Body Mass Index was added to demographic data for analysis. Information on education was not collected. Participants were asked to write-in race/ethnicity, and over a third of the population chose not to answer this question; consequently, data on this demographic variable is not complete and is not included. Participants were also asked if they engaged in regular
physical activity, alcohol consumption, and tobacco consumption, and these characteristics were included in the analysis.

- Dr. Cartmel also suggested including data on whether DS were recommended by a doctor. The results for this question are included in the text.

- Minor revisions were addressed including clarification of which populations were matched for age and sex, alteration of decimal places presented in Tables 1 and 4, addition of the actual percentage of participants believing DS are essential to health, removal of statistical tests used from the Tables and Figure, and clarification of the proportions of participants utilizing physicians and books for DS information.

- Dr. Mehta suggested removing the “Total” column from Table 1 to enhance clarity. The authors believe this column is important for comparison, but we are willing to eliminate it if necessary. The first footnote describes that statistical analysis was conducted between East and West Coast participants.

- P values have been added to Table 2.

- Footnote “d” in Table 3 was eliminated per Dr. Cartmel’s suggestion, but the authors believed it was important to included denotation of statistical significance.

- Table 4 was re-analyzed as a three level variable.

- Dr. Cartmel expressed concern that TV/radio was not included in the questionnaire as a separate category from magazines/journals/news. We recognize that this as a limitation and addressed it as such.

- Text describing Figure 1 was decreased to reduce repetition with the Figure. The title and description of Figure 1 was moved to the manuscript as required.

- The DS questionnaire is included as an additional file.

**Discussion**

- The discussion section was shortened to include only information directly relevant to study findings.

- Findings about DS usage were compared to NHANES findings (per Dr. Cartmel’s suggestion) and NHIS findings (per Dr. Mehta’s suggestion).

- Reasons for differences found between geographic locations are discussed as is generalizability to the greater population.

- In the section about attitudes regarding DS and specifically potential disapproval of DS by physicians, the discussion is slightly altered to include a high-quality qualitative study in which the authors address this topic. Dr. Mehta suggested including two important studies on patient DS disclosure. The first is from a NHIS study; there is a more recent version of this survey, and findings are discussed in the manuscript. Citation of a valuable study by Mehta was included in the discussion of this topic.

- Additional, more current references were added to the discussion about physician knowledge of DS.
• The limitation of the volunteer nature of the participants in this study is addressed in the 
  Strengths and Limitations portion of the discussion.
• The last sentence of the conclusion was omitted as suggested by Dr. Cartmel.
• The manuscript was thoroughly edited for language.

References

• Dr. Cartmel requested a “date accessed” for a website referenced. This was included for 
  all websites referenced.

We are thankful to the reviewers for their expert opinions and suggestions, and hope that 
their concerns were addressed adequately. Please feel free to contact me with any additional 
questions or concerns.

All co-authors accept responsibility for the content of this manuscript. There are no 
declared conflicts of interest.

Sincerely,

Mary Rozga, MS
Doctoral Candidate
Food Science & Human Nutrition Department
Michigan State University
2125 S. Anthony Hall
East Lansing, MI 48824
Telephone: 517.355.8474 Ext. 154
E-mail: rozgamar@msu.edu