Author's response to reviews

Title: Pain and sensory detection threshold following acupuncture are modulated by the association between coping strategy and acupuncture sensation

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Version: 3 Date: 4 November 2013

Author's response to reviews: see over
Dear Colleagues:

Enclosed, please find our manuscript “Pain and sensory detection threshold following acupuncture are modulated by the association between coping strategy and acupuncture sensation” submitted to BMC Complementary and Alternative Medicine.

We believe that this article is important for at least for the following reasons.

First, we found that the interaction between the psychological coping strategy and physical stimulation intensity can affect pain and sensory threshold modulation. In the active coping strategy group, improved pain and sensory detection thresholds were correlated with greater acupuncture sensation, while in the passive coping strategy group, improved pain and sensory detection thresholds were negatively correlated with greater acupuncture sensation. These findings were reported for the first time, and have clinical importance that acupuncture analgesic effect can be maximized by adjusting the acupuncture stimulation intensity according to the patient’s coping strategy to the treatment.

Second, we found the successful induction of active coping strategy in the active coping strategy group. This shows that coping strategy can be generated by experimental coping condition, which implies that patient’s coping strategy also can be changed according to the doctor’s instruction. Thus, the instructions given to the patient before and during the treatment (as a psychological intervention) and applied acupuncture intensity (as a physical intervention), are important for improvement of the patient’s symptoms and can be thought of as part of the doctor-patient relationship.

Given these reasons above, we feel that this article will be of interest to scientists and clinicians interested in the acupuncture analgesic effect, and the potential of doctor-patient relationship and individualized treatment. Thus we believe that this manuscript would be appropriate for that the large readership of this journal.

Co-authors had reviewed the final version of the manuscript and approved the submission. And the authors have no conflicts of interest.
We recommend that the paper is sent for review to the following three reviewers (These potential reviewers are experts in this field, so they can provide an objective assessment of this manuscript):

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We made some changes according to the editor’s valuable comments on the issue about clinical trial registration:
1. According to the recommendation to register our study in a publicly available registry that meet all of the ICMJE criteria and the requirement of WHO Primary Registries, we included the trial registration number as the last line of the abstract of the manuscript (Trial registration: KCT0000905). The number was issued by the Clinical Research Information Service (CRiS), which is the registry that currently meets the criteria of Primary Registries in the WHO Registry Network and the requirements of the ICMJE.

We hope that this manuscript can meet the high standards of the BMC Complementary and Alternative Medicine.

Yours sincerely,

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