Author's response to reviews

Title: The use of complementary medicine by two community groups of women with polycystic ovary syndrome.

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Author's response to reviews: see over
BMC Alternative and Complementary Medicine,

Dear Madam/Sir,

Please find attached our revised paper titled: ‘The use of complementary medicine by two community groups of women with polycystic ovary syndrome.’

Thank you for reviewing our article, your comments and opinions were indeed valuable. We have incorporated major compulsory and discretionary revisions and believe the article has improved clarity. Thank you for your advice. Following is an overview of the changes in response to the report comments by reviewer Dr Lisa Moran, followed by the description of how each reviewer’s points were addressed within the text of the article.

In relation to the associate editor’s comment regarding data reanalyses with reference to the use of dietary supplements compared with non-dietary supplements, we decided not to undertake additional data analyses in this paper The current article is part of a larger study that included investigation of dietary and exercise use, practices and attitudes of women with PCOS, and this will be submitted for publication shortly

The Cochrane definition of CM includes dietary supplements other than those prescribed to prevent or treat medically diagnosed deficiencies, and/or used in countries with widespread deficiencies or as parenteral administration in hospital settings. Whilst we did distinguish between doctor’s prescriptions of vitamins and minerals as not being complementary medicine, we didn’t identify dieticians’ prescription of dietary and non-dietary supplements as conventional rather than complementary. Participants may have interpreted their dietician’s prescription of dietary supplements as complementary medicine. This was a limitation of our study and a point highlighted in the discussion section (lines 242-251).

Our manuscript presents part of a larger investigation into the use of self-help and complementary medicines by women with PCOS. A separate manuscript explaining the patterns and prevalence of dietary and exercise use, practices, aims and self-perceived effectiveness is undergoing preparation.
to questions about dietary practices included a wide range of options and we have undertaken relationship analyses between several variables including those suggested by reviewer Dr Lisa Moran.

Response to Reviewer Dr Jane Frawley

1. Thank you for you acknowledgement of the importance of our work.
2. Changed to ….sleep disturbances reduce weight and to improve general wellbeing. (line 154).
3. Clarified meaning of the use of CM for particular reasons and predictability for self-perceived effectiveness (line 162-167).
4. Women actively seeking support is discussed in further as a limit for generalisations (lines 236-237).

Response to reviewer Dr Lisa Moran.

1. Methodology. Questions clarified (line 55-62). PCOS was self-reported by participants and information was collected in relation to specific symptoms including menstrual irregularities and hyperandrogenism. These are reported in the results section (lines 108-112). Oligo/anovovular information was not collected. The time taken to complete the pilot survey was reported (line 71).
2. Clarified the question in relation to insulin imbalances (line 59).
3. Inserted ‘self’ in self-reported (line 108). Self-reported body weight is acknowledged as a limitation of the study in the discussion (line 265).
4. Information on anxiety was not collected.
5. Yes overweight and very overweight were self-characterised and acknowledged as a limitation in the discussion (line 265-6).
6. The use of pharmaceuticals including insulin sensitising therapy was reported in the results section (lines 113-116). Diet and exercise therapy was an additional section of the same study and results will be reported in a separate manuscript.
7. The focus of this study was complementary medicines in addition to lifestyle intervention (dietary and exercise practices) rather than as an alternative. The prevalence, patterns of use, treatment aims and perceptions of effectiveness for dietary and exercise intervention reported by the same sample of women with PCOS will be presented in a separate manuscript.
8. Single treatment aims are presented (line 140-142).
9. Clarified meaning of sentence (line 195).
10. The potential referral bias and participants with non-medically prescribed PCOS were presented as limitations in the discussion (line 197 and 241-243). Further elaboration on body weight with
reference to contrasting bodyweight for clinical verses community samples of women with PCOS (line 256-266).

11. Nutritional information seeking from registered dieticians will be reported in a separate manuscript.

12. Consideration for herbal medicine contraindications including St John’s wort in conjunction with pharmaceuticals including the oral contraceptive pill was presented in the discussion (line 217-219).

13. Comparisons between the characteristics of the sample and the clinical populations of women medically diagnosed with PCOS according to the Rotterdam diagnostic criteria, were presented in the discussion (line 261-266).

We hope the revisions to this article are met with satisfaction. Further revision is most welcome. Thank you again for considering our paper for publication in the BMC Alternative and Complementary Medicine.

Yours sincerely

Susan Arentz