Author's response to reviews

**Title:** Knowledge, attitudes and practices regarding gemstone therapeutics in a selected adult population: A cross sectional survey

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**Author's response to reviews:** see over
**COVER LETTER**

1. "I suggest that you remove the phrase 'a cross-sectional survey' from the title
as it doesn't really add anything. The population from which respondents were
recruited were a sub-set of the whole population and this is conveyed by the
word 'selected' in the title"

**Response:** Title changed:- the phrase ‘cross sectional survey’ removed. Pakistan
added in title, as per the suggestion of the first reviewer.

2. "Much of the material here is based on website rather than medical
or scientific
literature and while I understand the authors' difficulty in finding
literature on this
topic I felt that there was insufficient differentiation between the
unsubstantiated
claims presented on websites and work from peer-review sources. For example,
at the end of page 6 there is a statement that gemstones prevent hair
loss yet the
source for this information is from an online magazine article. I
suggest that the
background be revised such that is clear which information is based on
traditional
use, general and popular websites and magazines and the peer-reviewed
literature."

**Response:** We have provided details of sources in the references. In addition, we
have added phrases that information is from ‘popular internet based sources’
where it is required. Any thing other than the afore stated is from a peer-review
source.

3. "I'm not sure that I agree with the authors' statement that CAM is primarily
rooted in Eastern cultures and this is certainly not a finding supported by the
cited reference (Astin 1998)."

**Response:** We have removed this statement from our manuscript to remove any
ambiguity.

4. "Overall the background section could be considerably shortened to provide a
more succinct introduction to gemstone therapy and to this study. I would have
also liked to have known more about gemstone therapies in the context of the
traditional medicine in Pakistan"
Response:-We understand that a succinct background would have been important but we needed to highlight the lack of literature. Secondly, this is our second revision of the manuscript. In the previous revision, we were specifically asked to make the background more "comprehensive", focus in more detail on CAM and provide more information on the gemstone therapy for the readers to have a better understanding of the subject. The background was made more comprehensive keeping in line with this particular feedback.

We have added a paragraph on gemstone therapy in the Pakistani context.

5. "The authors do not mention whether institutional ethics approval was granted for this study."

Response:- A section of ‘Ethical Considerations’ has now been added in the (Methods) section to address this.

6. "It is not clear why the authors elected to use attendees at a hospital clinic. This should also be addressed in the limitations section."

Response:- This point has now been addressed in the limitations section.

7. "I suggest referring to the individuals involved in the research as participants or respondents rather than patients."

Response:- There was just one place where we had by mistake referred our respondents as ‘patients’. The correction has been done.

8. "It is unclear why the questionnaire was focused on gall stones and renal stones. Is this the primary use of gemstones in traditional medicine"

Response:-Although gemstones are "popularly" used in treatment of gallstones and renal stones (this has been added as a statement in the introduction now), this is NOT their primary usage. We asked the question in an open ended fashion to identify other diseases that respondents identified in their statements to the question.

Gallstones and renal stones have been mentioned as options in response to only 1 question (due to 'popular' use and most common responses attained during pre-
testing)… in addition to ‘others’ (for any other ailments that the respondents may be using them).

9. "As 400 of 465 individuals completed the survey the response rate is 86% not 90%"

Response:-This correction has been made in the abstract and the results section.

10. "Where p values are quoted as p=0.000 is this really 0 or is this p<0.0001?"
Response:-It is p<0.0001. We have made the corresponding changes in our text and tables.

11. "The presentation of the results is a little hard to follow and it would be helpful to the reader if the data relating to p values was included in the text rather than just giving the p value alone"

P values have been reported in the text under the section of Chi square test results. Their interpretation and implication has been addressed in the discussion and conclusion sections of the manuscript.

12. Figure 1 – what is the difference between media and newspapers?

Response:-this difference has now been mentioned in the text.

Media refers to television and radio.

13. I don't think you need both frequency and % data – given the overall n and % any reader can work out the number of responses for any category.

Response:- The authors agree. Columns of frequency have been removed from tables. This has indeed helped simplify the tables.

14. Table 1 - please provide standard deviations for the mean age in years data

Response:-This has been done.

15. I found Tables 5 & 6 a bit hard to follow as it wasn't clear what they specifically related to. Also CI is given below the tables but not confidence interval data seems to be given in the table?

Response:- CI's have now been incorporated into our tables.
16. The description in the supplementary file refers to giving bad news to patients – how does this fit with gemstone therapy?

Response:- Please accept my apologies for this. Actually, this was some other research project, emailed by mistake. It was some typo error.

17. There are some grammatical and other errors and the authors should avoid using terms such as 'sizable majority'.

Response:- This point has now been taken care of and we have tried our best to avoid using such terms.

18. Given that all participants were attending a clinic it would have been useful to know why they were there are whether there was a correlation between their health problem and use of gemstones. It would have also have been useful to know if these individuals used other traditional or complementary therapies for their health.

Response:- These points have been added to the limitations section of the paper. We thank the reviewer for bringing them up as they had not been addressed.

19. The statement that medical doctors now recognise gemstone therapy as an important healing art should be removed unless this can be supported by reference to the literature rather than a commercial website selling gemstones.

Response:- We have removed this line altogether to remove ambiguity.