Reviewer's report

Title: When empathy is higher in senior than in first year medical students: A cross-sectional study

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Reviewer: Gary Rogers

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General comments
1. This paper adds to the literature on the important topic of the apparent decline in physician empathy during medical school.

Major Compulsory Revisions
2. The authors' statement in the introduction that 'studies continue to indicate that empathy of undergraduate students declines throughout medical school' and indeed the whole premise that this is an established fact, fail to point out that ALL of the primary studies they cite to support this assertion emanate from a single US medical school - Jefferson Medical College. On the other hand, the two previous 'exceptions' they point out, both report studies done (using translations of the Jefferson instrument)at other medical schools in non-English-speaking countries. If this state of affairs were made clear in the introduction, then the reader would be inclined to question whether this apparent trend were not a characteristic solely of Jefferson College, rather than a more general phenomenon that needs to be refuted. The authors should either cite studies from other English-speaking schools that support the general assertion or make their absence more explicit and adjust the context of this study accordingly in the introduction. (Further review identifies that the authors have, in fact, cited a study from a second US medical school as reference 28 but this is not mentioned in the introduction. Inclusion of this study might then suggest that the phenomenon is confined to medical schools in the US. Again, if this is not the case, the authors need to show evidence that refutes this conclusion to set the context for their own study)

3. The authors assert that 'the student version of the JSPE has been adapted to several countries/languages including Portugal' then cite as evidence seven papers, five of which appear refer to the use of the original English version of the JSPE in the United States (probably all at the same school), one of which is a review by the original US authors and the last of which appears to be an unpublished paper in Portuguese. If their assertion is true, they need to point to primary evidence at this point in the text of the instrument's use in other countries and languages (including, for example, citing the two papers they cite elsewhere reporting its use in Japan and Korea!).

4. The authors' use of the phrase 'an even more accurate account of empathy trends' in the discussion implies, without justification, that the methodology they
report in the current paper gives an accurate account of such trends. The current cross sectional methodology is at best suggestive that such trends might exist. Such a suggestion would be bolstered by reassurance that the curriculum and learning methodologies of their program had been stable over the period between which the two sampled cohorts undertook them. If this is the case, then it should be stated explicitly in the paper.

5. The authors 'speculations' that special elements of their curriculum and pedagogy account for the apparent lack of an 'expected' difference favouring empathy scores among their earlier year students is drawing quite a long bow. Similarly, suggesting in the conclusion that the paper reports 'positive data on how [the authors] nurture empathy' goes rather too far. The approaches they describe are not at all unusual in contemporary medical education and, while it is an important in making sense of the study to understand the program in which it took place, even an implication of possible causality here is very premature.

Minor essential revisions

6. There is a significant number of typographical errors in the piece and the referencing also has several imperfections (eg inconsistent use of journal name abbreviations, inconsistent use of edition numbers, and wrongly naming 'J Gen Int Med' as 'Gen Int Med' in reference 28, resulting in difficulty in the reviewer locating a cited article).

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

I declare that I have no competing interests.