Reviewer's report

Title: Empathy in Chinese medical students: Psychometric characteristics and differences by gender and year of medical education

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Reviewer: Hitomi Kataoka

Reviewer's report:

This study is an extension of work on an instrument developed for measuring physician empathy. Authors translated The Jefferson Scale of Physician Empathy into Chinese using the back-translation method. This study reports on psychometric analyses for a Chinese version administered to 902 Chinese medical students at one medical school. This version revealed acceptable range of Cronbach’s alpha, and factor analysis suggested similar pattern which is seen in other countries.

Minor Essential Revisions

1 The response rate of students in each academic year should be presented. The number of fourth year students is much less than other year students. Please explain the reason of this difference.

2 Detailed descriptive statistics about empathy score, such as 25% and 75% percentile data and median data should be presented.

3 The sample included 277 men (36.8%) and 476 women (63.2%). Is the ratio of men and women same as that of the entire student? Because women are higher in empathy, the ratio of women is important.

Discretionary Revisions

1 Authors discussed about the reason why baseline empathy score is lower in Chinese medical students, compared with other countries such as Unite States. They quoted reference 13, and this difference attributed to cross-cultural differences in social norms, ethnicity, religious beliefs, pedagogical methods, and sex stereotyping. However, more specific reason or background should be explained about the empathy score in 1st year. For example, the system of entrance examination and trait of students who entered medical school, and so on.

2 Authors mentioned that “medical curriculum reforms that introduce early exposure to clinical training gave students opportunities to have more interaction between theoretical and practical disciplines through observing real medical practice and empathizing with patient needs, although the baseline score on empathy is lower at the beginning of medical school comparing to other countries”. When was this curriculum change happened? Did all students who participated in this study experience this early exposure?
3 It is said that medical training is always divided into 2 years of basic sciences, 2 years of clinical medicine in China. Empathy score in Chinese medical student seemed gradually increased year by year. Do the students can be exposed to clinical aspects or contents about the professional competencies, every academic year?

Level of interest: An article of importance in its field

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.