Reviewer's report

Title: Family and community concerns about post-mortem needle biopsies in a Muslim society

Version: 1 Date: 8 December 2010

Reviewer: Valerie Sheach Leith

Reviewer's report:

Thank you for the opportunity to review this paper.

The focus of this study is the decision making process by families and community members in relation to the use of post-mortem needle biopsies to establish cause of death in Bangladesh. Post-mortem needle biopsies are perceived to be useful in overcoming two major challenges in this respect; most deaths occurring in the community setting, and religious beliefs relating to the conduct of full post-mortem examinations. This paper does have the potential to make a useful contribution to the existing literature. I do however have some significant concerns.

Major Compulsory Revisions

The major concerns about this paper relate to the description of data collection and analysis and the reporting of the findings. The following points should be addressed.

Data collection

1. More information about the location of the five communities should be provided. Were they geographically proximate or distant to one another?

2. It is stated that the authors had pre-existing relationships with these communities. Given that this (as the authors recognise) may have influenced the nature of the group discussions and thus data gathered, this relationship should be explained in greater detail. Further consideration should be given to the (unequal?) power relationships that may influence the study findings.

3. It is not clear how participants were approached to take part in the study. Did any families/community leaders approached refuse to take part?

4. A table (or similar) rather than an appendix should be provided detailing who took part (family members and community and religious leaders) in the study (and the age and gender of the deceased where applicable, as this is highlighted by the authors as being important to the study). It is stated that “16 group discussions” took place which led the reviewer to believe that several family members had participated in each discussion but 16 people (8 male and 8 female took part in total). This was confusing and should be clarified in the article.
5. The authors should reflect on how the way the study was introduced to participants may have influenced their responses.

Data Analysis

1. The discussion of data analysis is relatively brief. It appears that no clear methodology (e.g. thematic analysis) was adopted in analysing the data. It is not clear why transcripts were not transcribed in full. As a result of this lack of detail the reviewer is not able to evaluate the robustness of the data analysis or subsequent findings. Field notes are mentioned in this section, but do not appear to inform the findings as they currently stand.

Findings

1. A system for identifying participant quotations is required along with information on the deceased family member e.g. gender/age.
2. Overall there is a lack of supporting evidence (in the form of participant quotes) to support the arguments being made. For example the 'building trust' paragraph contains no participant quotes at all.
3. Provide contradictory evidence. For example, it is stated that “all but a few study participants said that they would agree...” but there are no quotations from those who did not agree or discussion of the reasons behind their refusal presented in the findings section.
4. The discussion of the identified themes would benefit greatly from being linked to some of the existing literature (e.g. studies which explore how trust can be established in low income countries).
5. Some consideration should be given to the implications of collecting specimens without the permission of one parent (see discussion of emotional considerations).

Discussion

1. Further consideration should be given to the practicalities of gaining consent for post-mortem needle biopsy in light of the study findings.
2. Further consideration should be given to eliciting a range of views from other families/communities with which there are no pre-existing relationships.
3. This section would be strengthened by referring to any relevant existing literature.

Minor Essential Revisions

1. For those unfamiliar with customs and belief systems in Bangladesh the rationale behind holding single gender discussion groups should be briefly explained.
2. Provide a brief explanation on the role of the community and religious leaders.
3. Change the theme title ‘emotional considerations’.
4. In the introductory section there appears to be an abrupt break between paragraphs 3 & 4. A brief section detailing the influence of religious beliefs on attitudes towards post-mortem examinations in Bangladesh should be provided prior paragraph 4.

Minor issues not for publication

1 Paragraph 1 (Introductory Section) – the sentence beginning ‘An outbreak of sudden child deaths...went undiagnosed” should be clarified; it is not the outbreak that went undiagnosed, but the cause of the outbreak.

2 Paragraph 3 (Introductory Section) – the sentence “this approach focuses on patients who actually die...” seems redundant.

3 Paragraph 5 (Introductory Section) – the sentence “needle biopsies might be preferable to autopsy” should be clarified; to whom might it be preferable?

4 Paragraph 5 (Introductory Section) the goal ‘to determine the feasibility of public health research studies using this approach’ is not mentioned as a goal in the abstract.

5 Paragraph 3 (Methods Section) “We” is overused in this paragraph.

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

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

'I declare that I have no competing interests'