Reviewer's report

Title: An eight-year follow-up national study of medical school and general hospital ethics committees in Japan

Version: 2  Date: 26 May 2007

Reviewer: Anne Slowther

Reviewer's report:

General
The paper has improved in revision but I think could still benefit from some clarification in the background and in the use of the blood transfusion policy as a marker of committee activity

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Discretionary Revisions (which the author can choose to ignore)
I still find parts of this paper confusing because of the conflation of research ethics review and the clinical aspect of the ethics committees. The authors have now made it clear that ethics committees in Japanese hospitals and Universities have combined research and clinical activities. However the introduction still sets the scene as if research ethics review is the major area to be considered in this study. As a key comparative activity looked at in the study is the development of a clinical ethical guideline, that of blood transfusion for Jehova's witnesses, this creates confusion for the reader. I would suggest that the introduction is re-written to separate out the research protocol review and clinical support activites of ethics committees even more clearly. Thus the initial background could as now stress the importance of the development of research ethics review and committees for this , with reference to the declaration of Helsinki. A separate paragraph could then explain that in many countries separate ethics committees had developed to consider ethical issues in clinical care and institutional policy making (for example the US and the UK). A third paragraph could then set out the situation in Japan, emphasising the combined role of Japanese ethics committees in Medical Schools and hospitals. It would be helpful to know what differences there are between these two types of committee. DO medical school ethics committees provide policies or advice to teaching hospitals and hospital ethics committees provide policy and advice to non teaching hospitals? These suggestions would incorporate the current background that the authors have given but clarify the situation both internationally and in Japan.
I am still not clear what justification the authors have for using the existence of a policy on blood transfusion in Jehova's witnesses as a marker for either committee activity or committee or how well a committee functions. Can the authors explain why this is seen as indicating adequate functioning of a committee? WOuld the authors like to comment on why they think medical school ethics committees are more actice than hospital ethics committees. This would be an interesting discussion point.

What next?: Accept after discretionary revisions

Level of interest: An article of importance in its field

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 I have no competing interests