Author's response to reviews

Title: Generic medicines: an evaluation of the accuracy and accessibility of information available on the Internet

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Author's response to reviews: see over
Dear Sir or Madam,

I am submitting a revised version of the manuscript entitled *Generic medicines: an evaluation of the accuracy and accessibility of information available on the Internet*, as per your email, following peer review.

Below are the specific responses to each reviewer’s comment.

If you have any questions or need any further clarifications, please do not hesitate to contact me.

Sincerely,

Suzanne Dunne
Responses to Reviewers’ Comments

Specific responses to Stephen Maloney

We thank the reviewer for his helpful comments and suggestions and, especially, for acknowledging that this work presents findings based on quantitative research methods that are important to those working in this area.

Responses to general comments: As recommended, language corrections have been made throughout the manuscript.

Responses to major revision suggestions: The reviewer did not suggest any major revisions.

Responses to minor revision suggestions:

The article would have more ‘punch’ if it were more concise, with clear links between the arguments made, and its relevance.

Overall, the language in the paper has been made more concise, and it has been shortened by 447 words.

Authors include sentences on how previous studies have isolated their work to particular regions... why this is relevant.

This has now been made more concise. Focus of the cited papers is limited to single countries and, so, is relevant in the context of our focus on 5 countries.

Reference to the popularity of wikipedia as the 6th most accessed website, is made twice in the manuscript.

This second reference to that fact has been removed.

Define SERP when first used in the text.

This is now done (Page 6)

Why the authors decided not to examine sites that included sales.

This is an interesting topic. Considerable thought went into the exclusion of these sites and the decision was based on reference to methods used elsewhere (ref 9: Langille et al) and the fact that such sites often place descriptions/explanations of what generics are (if present at all) on peripheral pages while sales/ordering processes are to the fore and, therefore, we believed that searchers would not favour these sites over those where the required information is more obvious. Also, we believe that this is a topic for an additional future study explicitly looking at variations between commercial and non-commercial websites.

Choice of particular countries.

These countries are largely native English speaking and representative four continents.

Suggesting use of tool on other medical related topics.

The concluding statements of the paper have been amended to reflect this point. The sentences now read “The WQA tool developed during this evaluation of generic medicine-related site proved effective and relatively easy-to-use in that context, and may, if adapted, be suitable for assessment of other types of medical/healthcare information websites.”

Simpler to just use ‘readability’ in place of accessibility.

“Accessibility” is used in the context of both readability and understandability of websites, and is more than simply readability. This is now clarified throughout the paper.
Specific responses to Michaël Laurent

We thank the reviewer for his helpful comments and suggestions. Each of these are dealt with in
detail below.

Responses to major revision suggestions:

1/ the importance of the topic is greatly overstated in the introduction
This language has now been tempered throughout.

…the conclusion that “a website designed using the WQA tool developed in this study, is likely to
rank highly in google.com SERPs” is likely wrong and totally speculative.
The conclusions section of the abstract has been revised and states this less strongly, now referring
to “…improved likelihood of ranking highly…” rather than “is likely to”.  
Also, reflecting the reviewer’s comments regarding a correlation of >0.3, the methods section mow
states that ‘Spearman’s correlation coefficient ($r_s$) was used to measure the association between the
ranking of websites with WQA scores and readability assessments. Absolute values of $r_s > 0.3$ were
considered to represent moderate correlations, > 0.5 were considered strong correlations.”
Also, the limited nature of this study was stated, now on page 19, that “However, the finding of
statistically significant correlations in this study was limited by the small sample sizes … “

2/ The results section contains a lot of Discussion elements.
Overall, the paper and especially the results section have been made more concise.

3/ The WQA gives the impression in the abstract that it is a tool to evaluation website quality in
general.
The abstract has been revised to explicitly link the tool with generic medicine-related websites.

4/ What software package was used for the statistics?
Software used was Statistical Packages for the Social Sciences (version 20.0). This detail is now
stated in the Methods section.

5/ In their methodology, did the authors consider sponsored links or YouTube
results (or weren't these encountered)?
YouTube was not encountered on the first page of results for any of the searches. Sales links were
excluded.

6/ Therefore, carefully adjust the wording (e.g. “WQA scores of 15 were awarded to two other
websites, indicating relatively good information content” needs to be rephrased or
removed altogether).
This has now been removed.

7/ Importantly, related to this issue, what information source did the developer use to create the
WQA tool? The first author must have used a handbook…
The authors did not make use of a handbook or other resource. The first author, in particular, has
greater than 15 years experience of the generic medicines industry. This, combined with information
garnered by the authors when preparing a comprehensive review of generic medicines (reference
21 in paper) informed the design of the WQA tool.

8/ Given the importance of Wikipedia in the results, I would suggest including some discussion of
Wikipedia’s reading levels with references from the literature.
This has now been done on Page 16.

Responses to minor revision suggestions:

1/ The first sentence can be supported by better References than [1-4], i.e. more
systematic studies on online health information quality.
This has been done

2/ Instead of ref. [26], the authors might better cite: Eysenbach G & Köhler C. and Hansen DL et al.
These papers have been read and are now cited in the manuscript.
3/ “SERP” use
We have removed “SERP” from the abstract. We believe this to be an accepted acronym and have used it judiciously in the paper. Some references to SERP have been removed and we have carefully checked the paper to ensure that its use is grammatically correct.

4/ Instead of using scores from one observer.

In this study, comparison of the scores of the two independent reviewers showed that almost perfect agreement was seen (ICC = 0.94) and so remediation was not needed. This is described on Page 15.

**Responses to discretionary revision suggestions:**
1) This has been done.
2) This has been done.