Reviewer's report

Title: Stroke patients' utilisation of extrinsic feedback from computer-based technology in the home: a realistic evaluation

Version: 2 Date: 16 August 2013

Reviewer: Sandeep Subramanian

Reviewer's report:

A well written paper that highlights some of the growing questions in the field. The authors need to be commended for their good work. However, a few clarifications are sought and are listed below.

Major compulsory revisions: The authors mention that the participants were uninterested in watching replays of the avatar (i.e. KP feedback). Is this an implication that KP feedback as a whole was not useful, or KP feedback provided in the context of this study was not useful? I suppose from reading the article that the latter may be true, given the comments of the participants on gender of the avatar. KP feedback has been shown to be useful for people after a stroke (Molier et al., 2010), especially when provided through the medium of virtual reality gaming like environments (Subramanian et al., 2013). The authors must address this point and add a section on type of feedback and its impact in the discussion.

Minor Essential Revisions:
1. Kindly provide a reference for the following statement in the Background section "However, due to ever increasing.....................................met" (lines 20-22, page 3). It seems more like a personal opinion than a statement in the background.

2. In figure 1, kindly indicate the placement of the inertial tracking devices. It is not clear from the image supplied.

3. Provide more details about the qualitative KP (more words, description of what was actually provided). It is not very clear from the text. What was it based upon.

4. Provide more details about the two groups of community stroke practitioners in terms of who they were, qualifications (OT, PT, Nurse, psychologist, etc.), setting in which they worked in and years of experience. These are factors that can strongly influence opinions.

5. Did the carers have any ideas for improvements in the system? If so, were these taken into account?

6. How was a definitive diagnosis of stroke reached in the inclusion criteria? In addition, how was visual impairment determined and what type of impairment led to exclusion (e.g., neglect, visual field deficit, hemianopia, etc.)
7. In the discussion section, the authors imply that repetitive usage led to motor learning. This is not necessarily true and motor learning was not directly an outcome, the statement has to be modified accordingly. It is suggested that the statement be modified to say that repetitive use probably facilitated motor learning or something similar.

References:


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 that I have no competing interests