Author's response to reviews

Title: A Wireless Health Outcomes Monitoring System (WHOMS): development and field testing with cancer patients using mobile phones

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Version: 4 Date: 28 May 2004

PDF covering letter
Dear Editors,

Thank you for the opportunity to publish our manuscript “Wireless Health Outcomes Monitoring System (WHOMS): development and field testing with cancer patients using mobile phones” in BMC Medical Informatics and Decision Making. We found the reviewer’s comments to be very helpful and we addressed their suggestions.

The manuscript has been revised to incorporate the reviewers’ comments. In addition, we have included our specific responses to the reviewers’ questions and comments below.

We appreciate your consideration of our manuscript and look forward to hearing from you regarding the status of the publication.

Best regards,

Dr Emilia Bielli

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Reviewer #1
This is an interesting application of IVR to symptom assessment. It is one of the first to focus on symptoms using wireless communication. This is a preliminary study, and it would be interesting to know more about how the information was used by the providers, and if it made a difference in clinical care. Perhaps we can expect that from future papers from this group.

Any information about provider acceptance or interest in the system would be appreciated.

Declaration of competing interests: Have interest in company providing IVR symptom assessment (Interactive Performance Technologies).

Authors’ Response:
We agree with the observations of Charles Cleeland. This preliminary study demonstrates the acceptance of this system by patients, a necessary first step in its' potential adaptation in the clinical area. The next studies could be a) a demonstration of its' usefulness to patients and/or providers, and b) a demonstration of provider acceptance and use of the system. We have also changed the last sentence of the Abstract with a less emphatic one: "This system could be useful in patient-doctor communication. Such a system is likely to lead to early detection of any patient problems" with: "This system could be useful in patients' distance monitoring. Such a system is likely to detect patient suffering earlier, and to activate a well-timed intervention".

Reply always keeps the focus on innovation and know-how: wireless technology and programming devices are key drivers of Reply business development in order to build advanced and effective mobile solutions. Company’s investments have always been done according to this point of view, like in WHOMS, where Reply joined together technological experience and scientific knowledge to help people. Up to now, everything’s been done thanks to the enthusiasm of Marcello Tamburini, his staff and Reply people. We didn’t get any revenues, just costs, but we strongly believe it can be a big sales opportunity for the future, apart from being a way to improve patients quality of life, using a common device as mobile phones.

Reviewer #2
I read the article and I found it very interesting. In my experience it is quite difficult to implement this kind of monitoring because the need of resources (PDA, etc; not all patients have access to the same PDA) and the relative illiteracy and inability that patients have when using this devices. Effectively, only a half of patients accepted to be involved in the survey and the reasons stated in page 5 are in this direction. This would be a major limitation (specifically in older patients and disabled) to implement this kind of monitoring as you stated in the discussion.

Quality of life questionnaires should be short and easy to answer for patients when monitoring trough PDA or internet otherwise the burden for the patient is too much.

I would recommend to include in table 1 the p values when comparing those who accepted or rejected the monitoring.

Authors’ Response:
We choose to insert the univariate p values the referee asks for, in table 3 rather than in table 1 in order not to make table 1 too complex and to present them together with multivariate analysis results.