Reviewer's report

Title: Risk Communication Formats for Low Probability Events: A study of patient preferences

Version: 2 Date: 28 January 2008

Reviewer: Stacey Sheridan

Reviewer's report:

General:
Authors have been very responsive to reviewer comments and made several changes that have improved the quality of reporting and readers' ability to assess the value of this work. In particular, changes have clarified the preliminary nature of this work, the study population, the measurement of preferences, and the outcome of interest. With these clarifications, this feasibility study generates important hypotheses about the graphical presentation of risk information and will help focus future studies with larger, representative samples.

Major Compulsory Revisions:

The improvements authors have made in their manuscript allow the reader to focus on the importance of the results and the potential implications for the field. Toward this end, it would be helpful to see discussions of research implications, focusing on such issues as:

a) Why combination formats may be better than single formats (i.e. what different types of information may be gained from different formats that make the combination helpful) and how hypotheses about format success can be tested
b) Whether the preference for combinations implies that more work needs to be done to find a single format that is more successful than existing formats
c) Whether the combination of information may lead to poorer understanding. In paragraph 1 of the discussion (p9), authors note that they were unable to find previous studies that have assessed patient preferences for single versus combination formats or for different combinations of risk presentation formats. They, however, make no conjecture about what results they might expect. Additionally, they might be interested in interpreting their conjecture in light of study my research group and I have conducted; this study looked at multiple presentations of risk (ARR, RRR, and NNT) in comparison with single presentations (Journal of General Internal Medicine 2003; 18: 884-892) and found that multiple presentations reduced understanding.

Minor Essential Revisions:

1) Authors repeatedly present information on preventing cancer deaths. It would be more accurate to present information as cancer screening.
screening and early treatment leading to prevention of cancer deaths. Screening by itself doesn’t prevent deaths. Authors may have clarified this point to study participants in a preamble to the preference measurement; if so, it would be helpful to know the content of the preamble.

2) The augmented icon display in Figure 2 needs a key to aid interpretation.

Discretionary Revisions:

None

What next?: Accept after discretionary revisions

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