Reviewer's report

Title: Nurse-led self-management programme for patients with an implantable cardioverter defibrillator; an exploratory study.

Version: Date: 1 21 August 2006

Reviewer: Samuel F Sears

Reviewer's report:

General
This small scale study (N =10) continues to support an important adjunct therapy for ICD patients related to living with an ICD. The current study appears to be well-executed and appropriately conceived. The small sample, the lack of statistical testing, and the incomplete medical variables (shock history, time with ICD, etc) limits the enthusiasm somewhat.

The paper still has value associated with its findings because it further underlines the needs of these patients. No adverse events were noted and patients reported value from the program. I think the title might be changed to more of a "feasibility study." My response to the paper is generally positive as the investigators committed few errors. The most significant criticism is whether a study of ten ICD patients pushes the field further. The application of this program is news but the lack of statistical testing may not be well-received by readers. As noted in the paper, only the Kohn et al study was sufficiently powered to detect statistical differences in an ICD patient program. Edelman et al highlight the handful of studies that are similar to this one that are generally positive but do not have statistical differences to support its value. The lack of control group further limits the paper and makes it difficult to determine if the benefit is the program or attention/placebo. Nonetheless, the authors do have some psychometric data to support their efforts.

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

Please see above. The paper is generally well-written and unbiased in its tone. Nice work.

The lack of significant medical history information of the participants is surprising. The paper would be strengthened by this. For example, shock history is not available in the current paper.

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

May want to emphasize the feasibility aspects of this work vs. trying to sell the current data too hard in the discussion.

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Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of limited interest

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:
I have received research funding, speaking fees, and consulting fees from Medtronic, Inc, and/or St Jude
Medical Inc. within the past 5 years. These activities do not any way impact my decision making on this paper.

I do not hold stocks in any biomedical companies.

I do not have any patents pending.

I have no other financial competing interests.

I have a paper under submission at another journal that relates to an ICD psychosocial treatment. I do not believe that it influenced my thinking on this paper.