Reviewer’s report

Title: Guidelines; from foe to friend? Comparative interviews with GPs in Norway and Denmark

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Reviewer: Arash Rashidian

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It is an interesting study. The paper is clearly written and the arguments are concise and understandable.

The main finding of the study (i.e. the different between Danish and Norwegian GPs attitudes towards use of economic evidence in guidelines) is interesting and has novelty. However I have some major reservations about it.

I have two major reservations about the study that are concerned with the validity of the main findings of the study.

1. Sampling issues.

The authors have mentioned that one reason for the observed difference could be the atypical samples (page 10). But then they have left it without further deliberations. Later on, on page 13 they claim “the samples seem to represent the average of the GP populations in both countries”. I believe this latter claim is not justified.

The sampling strategies in both countries are not representative: not surprisingly the authors obtained a very low response rate to invitation letters. Table 2 does not provide evidence for representativeness. On the other hand the samples are not purposeful. As presented in the paper, the samples do not provide pre-planned variability within respondents in each country or aim for a group of respondents with known characteristics. While sampling is neither representative nor purposeful, I am interested in knowing how authors can set aside the argument that the observed differences may have been caused as a result of peculiarities in the samples.

Perhaps one possible way to tackle this major limitation is to compare the views raised in different focus groups. Was there any difference between the views raised in different focus groups?

2. Alternative explanations for the finding (if valid – see previous reservation)

Even if there are genuine differences between the views expressed by GPs from the two countries, how it is possible to refute other potential explanations for the observed difference? In summary I do not think the following statements in the abstract are justified: “The differences could be explained by the history of guideline development in Norway and Denmark respectively. Whereas regulative
guidelines were only newly introduced in Norway, they have been used in Denmark for many years.” “Comparative qualitative studies of GPs attitudes to guidelines may reveal cross-national differences relating to the varying histories of guideline development.”

In my view, at most the study has generated an interesting hypothesis.

For example, the differences between the two samples may have been caused because of difference in trust in the government in general (political factors); or in the health regulatory system in particular. If one is happy with the government or the health system decision makers in general, he or she is more likely to accept what they recommend, and vice versa. Or possibly, the differences may have been caused by the differences in social interactions and economical structure within each society. Other health system explanations can also be suggested. How can the authors conclude the differences are the result of ‘histories of guideline development’?

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