Reviewer’s report

Title: Integrating the promotion of physical activity within a smoking cessation programme: Findings from collaborative action research in UK stop smoking services.

Version: 1 Date: 4 January 2010

Reviewer: Amanda Daley

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Major Compulsory Revisions
None

Minor Essential Revisions

Abstract
In the background section it should be made clear that this study took part within stop smoking services in UK. Simply add “UK” to end of the sentence.

In the results section it should state the point at which there was a significant advancement in clients; stage of readiness – as it stands it is rather vague because we are not told in the methods when assessments took place.

Background

Page 3 paragraph 3: Methodological issues are not the only reason why studies have shown mixed results – it is possible that there is no relationship between exercise and smoking cessation and we have to be prepared to accept this might be the case? There seems to be the assumption that a relationship does exist, its just that studies have been poor. But an alternative explanation might be that exercise is not effective. At the moment we do not know which is true and a balanced view should be presented.

Page 4 paragraph 1: What does the use of the “fairly” mean? Would “relatively” be a better word here?

Page 4 paragraph 3: Who thought it would be unpopular – are you referring to participants/clients here?

Methods

Page 7 paragraph 2 (participants): How were the 11 advisors selected? We are given only vague information on the number of years advisors had been practicing – we are told they had been practicing for “many years” - this is somewhat vague and needs further clarification.

We are told on page 7 that 11 advisors participated in the study but on page 8
only 7 advisors completed the surveys. What happened to the other 4 advisors?

Page 8 paragraph 1: Did participants given informed consent or written informed consent?

Page 9 paragraph 1: I do not understand the following line – “for clients who did not complete a follow-up survey we imputed their follow score” How can you impute the follow-up score if you don't have one? Do you mean baseline score?

Results

Page 10 paragraphs 2 and 3: Page 7 (paragraph 3) states that 7-day physical activity recall was assessed in advisors but no data on this outcome is reported in the results. We are only given 7-day physical activity results for clients. Did the advisors become more active? Also, did you measure 7 day physical activity behaviour AND time spent promoting physical activity by advisors? I can’t quite follow what was actually measured and thus reported.

The order in which results are presented for phase 2 (page 10) is different and somewhat haphazard for advisors and clients. Can you change these paragraphs so that data is presented in a consistent order for both? For example, start both paragraphs with self-efficacy data and so on…..

Page 11 Paragraph 2: Are the programmes in Birmingham and Plymouth typical of other programmes in the UK? What reassurances do we have that your results are in anyway generalisable? This is key if subsequent decisions about the viability of future research and ultimately services, are to be made on the basis of the results presented in this paper?

Discussion

Page 11 paragraph 3: I don’t quite follow the line “The smoking cessation advisors were enthusiastic about implementing the refined version of the intervention”. What does actually mean in real terms? Also, on what basis are the you making the comment “which quickly became almost effortless to deliver? This line seems rather subjective but it is a critical statement when talking about implementing services because it could be somewhat mis-leading without evidence to support it.

Page 12 paragraph 3: The intervention did not significantly change clients self reported physical activity levels? Therefore, does this study add to the growing body of mixed literature that you referred to in the introduction, which has failed to provide favourable outcomes between exercise and smoking cessation.

Conclusions

Page 14 paragraph 14: Given the data, the conclusions about promoting physical activity in smoking clinics being “certainly possible” and “could be undertaken in a
wide scale "are far too strong.

Page 15 paragraph 1: The grounds on which you claim a RCT is justified are currently weak and unclear. What type of intervention would you use in your RCT then given there was no change in clients’ physical activity behaviour, self-efficacy, outcome expectancy beliefs regarding physical activity as a cessation aid and no change in advisors’ stage of readiness for promoting physical activity as a smoking cessation aid, outcome efficacy or pro and con beliefs? You did not find a change in any of the key outcomes so it is hard to see how an RCT is now warranted. Should the next step be to test out different types of exercise interventions in this population/setting, as you have suggested earlier in the discussion, rather than a RCT to test effectiveness?

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.