Author's response to reviews

Title: Differences in the Structure of Outpatient Diabetes Care between Endocrinologist-Led and General Physician-Led Services: findings from a cross-sectional observational study

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Author’s response to reviews: see over
Re: Revision of manuscript number 1006991474995802

Differences in the Structure of Outpatient Diabetes Care between Endocrinologist-led and general physician-led services

Dear Professor Dominik Ose

We are very grateful for the opportunity to resubmit our revised manuscript and are pleased that both reviewers perceive the article’s findings as important to those with related research interests. We have considered carefully the comments of the editor and each reviewer and have responded to these below.

Please do not hesitate to contact me with any queries relating to this paper.

With best wishes

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Response to editor’s and reviewers comments for manuscript number 1006991474995802

Editor’s comments

Comment 1:
Please provide more context for your study in the Background section of your Abstract. You can see more details in the website.
Response 1:
We thank the editor for their helpful comment. We have inserted a background section to the abstract to describe more fully the context for the study.

Comment 2:
Conclusions. This should state clearly the main conclusions of the research and give a clear explanation of their importance and relevance. Summary illustrations may be included.
Response 2
We thank the editor for their helpful comment. We have inserted a conclusions section to the paper to address this comment.

Responses to Comments from Reviewer 1

Comment 1:
Are the data sound? Yes, as far as I can see. But I miss data on staff training and education, structured patient education, audit and feedback. These were mentioned in the methods, but barely answered in the results section.
Response 1:
We are grateful to this reviewer for their constructive comments. Data on quality improvement initiatives are now included in the results section (Table 3).

Comment 2:
Does the manuscript adhere to the relevant standards for reporting and data deposition? Yes, but I miss a clear table of the results (minor essential revision).
Response 2:
Three tables have now been included in order to more clearly outline our study findings.

Comment 3:
Are the discussion and conclusions well balanced and adequately supported by the data? Yes, but I miss the comparison to other national or international research in the discussion. Compare your findings to results of previous studies in Ireland or other countries for example the UK were almost the same questionnaire was used as well (minor essential revision).
Response 3:
We have made comparisons with findings from similar studies in the UK and incorporated these in the discussion. There are no comparable published studies in the Irish setting.

Comment 4:
Discretionary revisions - Use the same term for a profession: endocrinologist.

**Response 4:** We have made the necessary amendments throughout the manuscript.

**Comment 5:**
Explain the abbreviation WTE.

**Response 5:**
The abbreviation WTE refers to whole time equivalent and we have amended the manuscript accordingly.

**Responses to Comments from Reviewer 2**

**Comment 1:** Please describe the healthcare system in Ireland briefly.

**Response 1:** We are grateful to this reviewer for their helpful comments. We have revised the background which now includes a brief description of the healthcare system in Ireland and puts the study in context.

**Comment 2:**
In the result section, the authors should use tables or figures for readers to understand the contents more easily. Also it seems to be much better if the tables of figures focus on the comparison between endocrinologist and general physician reflecting the title of this article.

**Response 2:**
Three tables focusing on the comparison between endocrinologists and general physicians have now been included in the results section to help readers understand the contents more easily.

**Comment 3:**
In discussion the authors need to state clearly which result was especially interesting and how the result can be used for better diabetes care in Ireland.

**Response 3:**
We thank the reviewer for their helpful comment. We have inserted a conclusions section to the paper to address this comment.

**Comment 4:**
Does the word WTE mean whole time equivalent? The authors should spell out this word at the first appearance, because this abbreviation may not be so familiar for some readers including me.

**Response 4:**
Yes, we have clarified this in the revised manuscript as whole time equivalent at its first iteration.

**Comment 5:**
The authors mentioned waiting times for newly diagnosed type 2 diabetes patients. I do not understand well who refers patients to centers with an endocrinologist or a general physician. In other words, usually how and where is a patient newly diagnosed as diabetes? At annual health checkup at general physician clinic or by chance at general physician clinic?

**Response 5:**
In the background we now describe current delivery of diabetes care in Ireland and how this is largely hospital based. Although we don’t describe in the text where and when patients are diagnosed, this is most likely to happen in general practice and then patients are referred on to their
local hospital. This is an important issue that we hope to address in future studies where these data are prospectively recorded.

Comment 6:
In the discussion it is hard for me to catch the following sentence “Stable patients...were recalled to the diabetes outpatients routinely” would you please give me some explanation.

Response 6:
A definition of “stable patients” as those achieving targets for glycaemic control, blood pressure and lipid profiles has been included in the results section.