Reviewer's report

Title: "Best" physicians' attributes: the patient's point of view

Version: 1 Date: 29 February 2004

Reviewer: Robert Veatch

Reviewer's report:

General

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

The paper is vulnerable to questions about how sensitive the results are to the wording of the items. For example, one of the attributes that did not rate highly among respondents was "discretion," but it seems likely that, had the authors used close synonyms or related terms, respondents might have ranked them differently. It is not even clear whether "discretion" conveyed "exercise of wise judgment," "skill in keeping patient information confidential," or "independence of judgment." A related methodological problem is whether scoring the percentage of patients who selected an attribute is the most accurate way of measuring relative importance. For example, if two attributes contained overlapping characteristics, it seems reasonable that, when forced to pick only four, some respondents might have picked one while others picked the other term, but few would be likely to pick both, wanting to reserve their other three votes for some other entirely different concept. This would split the vote, leaving neither term a likely winner. Most critically, this methodology does not address the relative weight of respondent opinion. It is not clear that picking more attributes in a domain is the crucial measure of the relative importance of the domains.

All of these methodological problems raise questions about the details of the result, but the finding is so important and contrary to traditional professional norms pertaining to what counts as a good physician, that I recommend that the authors revise the paper to include in the discussion section an account of the potential methodological objections emphasizing that, even after one takes into account these methodological issues, the findings are dramatic. Whether every variant of this study would lead to the conclusion that patient autonomy is the most important characteristic, it seems hard to escape the conclusion that many patients find this domain very important and that it deserves much greater emphasis in physician training and evaluation.

Line-by-line comments:

Page 3, paragraph 1: The lead sentence is striking given the findings of the paper. Even the authors, while demonstrating the crucial importance of patient autonomy in the minds of patients, still begin by stating that it is the physician who makes choices. True respect for patient autonomy would use another language such as speaking of "a physician who conveys relevant evidence to the patient and works with the patient in helping the patient pick among plausible treatment alternatives."

Page 3, para. 2: The authors reveal nothing directly about the nation in which this study was conducted or about cultural identity of the respondents (except referring to the patients as being from "our hospital"), but, given the identity of the authors and the Table I data on "Origin" of respondents, the reader can guess the study was done in Israel and that the respondents were mainly or exclusively Jewish. Since the responses to these questions about patient preference are likely to be dependent on national and cultural identity, the authors need to address this issue. They might note
that traditionally orthodox Jewish medical ethics has not included patient autonomy as an important element so that, if the findings are from Israel, it implies that even a population not traditionally as oriented to patient autonomy as more secular, liberal populations in the US and Britain nevertheless can be interpreted as giving patient autonomy highest priority.

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

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

Level of interest: An exceptional article

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

None