Reviewer’s report

Title: Physicians’ communication with patients about adherence to HIV medication in San Francisco and Copenhagen: A qualitative study using Grounded Theory.

Version: 1 Date: 27 August 2006

Reviewer: J. Randall Curtis

Reviewer’s report:

General

This article is a qualitative study examining physician communication with patients about adherence to HIV medications. The authors used qualitative methods to collect data including direct observation and open-ended interviews. They used the principles of grounded theory for analysis. The methods are entirely appropriate for the research question and given the state of knowledge in this area. The manuscript is well written and the results are interesting.

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

1. Methods, page 9: The authors should provide more information about their efforts to establish the validity or trustworthiness of their analyses and findings.

2. Results, page 10: The “overview” paragraph does not provide enough information to understand the information presented. I appreciate the authors’ attempt to provide a brief overview, but this is too brief and consequently is confusing.

3. Results, page 10, 13, and elsewhere: The label of “believability” is distracting to me because it implies a judgmental attitude on the part of the person making the determination and because it is also not clear in some places whether the author is talking about the interviewer or the physician making this determination. I wonder whether another term could be used or perhaps a hybrid term. For example, sometimes the quotes and comments seem to imply things physicians do in order to “promote honesty”. I wonder if “believability/promoting honest” might be a better term for this category.

4. Results: I believe this manuscript would benefit from a diagram or figure that captures and explains the authors’ results. It should contain the information in table 2 and probably should replace table 2. Table 2 is too brief and does not do enough to explain the results.

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

1. Discussion, page 22: The term “more burdened patient population” should be explained more fully.

Discretionary Revisions (which the author can choose to ignore)

None.

What next?: Accept after minor essential revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No
Declaration of competing interests:

I declare that I have no competing interests