Author's response to reviews

Title: Effectiveness of Primary Care Triple P on Child Psychosocial Problems in Preventive Child Healthcare: a Randomized Controlled Trial

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Author's response to reviews: see over
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"Effectiveness of Primary Care Triple P on Child Psychosocial Problems in Preventive Child Healthcare: a Randomized Controlled Trial"

Dear Editor, dear Dr. Salam,

Attached please find our revised manuscript, "Effectiveness of Primary Care Triple P on Child Psychosocial Problems in Preventive Child Healthcare: a Randomized Controlled Trial". We appreciate the opportunity to revise our manuscript and found the last comments of one of the reviewers very helpful in improving the clarity of our manuscript. We are pleased to read that reviewer 1 agrees with our adjustments.

In this reply we address the suggestions for revision as given by reviewer 2. We are confident that we addressed the last minor amendments proposed by the reviewer and that the manuscript is now suitable for publication in BMC Medicine. We have done this by describing our responses, preceded by [RESPONSE], and followed by an indication of the pages of the text that have been modified in response to each of these comments. We have incorporated the adjustments in the revised manuscript and we highlighted them by using the track changes mode in MS Word.

With kind regards,
also on behalf of the other authors (D.E.M.C. Jansen, PhD, and Prof. S.A. Reijneveld, MD PhD),

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Reviewer's report
Title: Effectiveness of Primary Care Triple P on Child Psychosocial Problems in Preventive Child Healthcare: a Randomized Controlled Trial
Version: 5 Date: 23 September 2013
Reviewer: Sarah Stewart-Brown

Reviewer's report:
Thank you for asking me to take a look at this revised paper. The authors have addressed many of the points raised by myself and the other reviewer. They still need to (essential revisions) add to/amend the ABSTRACT as follows:

1. Methods:
add: that the population was identified by screening using the SDQ (cut point ..)

[RESPONSE]
Thanks for this helpful clarification. The modified text is (page 2):
‘The population was identified by screening using the Strengths and Difficulties Questionnaire (cut-off point ≥11; i.e. a subclinical score).’

2. Results:
Add: 81 families were recruited and randomized and 67 provided post intervention data

[RESPONSE]
Thank you for this addition. In the abstract, we started the Results section with the suggested sentence (page 2).

3. Amend the sentence starting 'None of the differences ..............This is not true.
It needs to say 'none of the differences on the primary or secondary outcomes were significant. Only one comparison (SDQ conduct score) out of nn (authors to add) was significant in the subsidiary analyses.

[RESPONSE]
Thank you for raising this point. We changed the sentence as follows (page 2):
‘None of the differences between PCTP and CAU were statistically significant. Only one difference (the SDQ conduct problems score) out of 20 was significant in the subsidiary analyses.’

Conclusions
4. Add: that the study was underpowered.

[RESPONSE]
We agree with the reviewer that this issue should be mentioned in the Abstract. The adjusted sentence in the Conclusion section is (page 3):
‘Based on this underpowered study, we cannot conclude that PTCP is more effective than the usual care in Preventive Child Healthcare.’
In the main text two points need addressing in the DISCUSSION

5. The authors need to amend the text of the discussion on Page 13 where they discuss the trial being underpowered. If a trial is underpowered the precision of the estimate of effect is reduced - so the estimate of 1.94 is not reliable; the real effect could be bigger or smaller. I suggest this sentence is deleted

[RESPONSE]
Thank for raising this point. We agree with the reviewer that the precision of the estimate of effect is reduced as a consequence of the lower sample size than intended. However, it is an important finding since the SDQ is our primary outcome. Furthermore, the accuracy of the estimate is also accounted for by the confidence intervals as presented in Table 2.

We added the following sentence to address the issue regarding the precision of the estimate (page 13):
‘Because this study is underpowered the precision of the estimate of effect is reduced, implying that the real effect could be bigger or smaller.’

6. The issue of external validity that I raised in my initial review is still not addressed and needs to be. The level of recruitment to the trial was low. The chances that families who took part were the same as those who refused is on the face of it unlikely. This compromises the application of the results of the trial to the general population of screen detected families/children.

[RESPONSE]
Thank you for raising this issue. We added the following sentence to the Strengths and limitations section on page 14:
‘Participation of only a small proportion of eligible parents in this study may have affected the external validity of this study, i.e. the application of the results of the trial to the general population of screen detected parents and children.’

Quality of written English: Acceptable
Statistical review: No, the manuscript does not need to be seen by a statistician.
Declaration of competing interests: I undertake trials and systematic reviews of parenting programs which is presumably why you asked me to review this paper