Author's response to reviews

Title: Income and Patient-Reported Outcomes (PROs) after Knee Arthroplasty

Authors:

Jasvinder A Singh (jasvinder.md@gmail.com)
David G Lewallen (lewallen.david@mayo.edu)

Version: 6 Date: 16 January 2013

Author's response to reviews: see over
We thank Dr. Zhang’s for his careful comments. Here are our edits and point-by-point response.

**Title:** Income and Patient-Reported Outcomes (PROs) after Knee Arthroplasty  
**Version:** 5  
**Date:** 15 January 2013  
**Reviewer:** George Zhang  
**Reviewer's report:**  
I still have a few new comments on version 5, according to the numbering of my original comments.

# 1a and 1b  
In the added Tables 2 and 3, the prevalence and unadjusted associated results seemed not impressive to support authors’ conclusion – “patients with lower income had better pain outcomes compared to patients with higher income”.  
It might be better to report in a consistent order for the “overall knee status”. "Much Better” category was listed before the column for “Better” category in Table 2, but in a reverse order in Table 3.  
Response: We agree and have modified this as suggested. We also ordered categories in table 2, as suggested.  
“Unadjusted prevalence of suboptimal pain, activity limitation and index knee function improvement outcomes is shown in Table 2.”

# 2c  
Please cite at least a reference which have used the model the authors used – "nominal logistic regression".  
Do the authors actually mean "multinomial logistic regression" model or others?  
Response: We have clarified this and added references. The model used was for polytomous logistic regression, which is a type of nominal regression, which does not make assumptions about ordering of variable categories.  
“Since improvement in knee function had 3 categories (much better, better versus same/worse [reference]), we used polytomous nominal logistic regression, which does not make any assumption of parallel slopes (as is made in ordinal logistic regression) [43, 44].”

# 5d  
Consistent reporting format can be further improved. For example, "OR of 1.9 [95% CI, 1.0, 3.6]" in the last sentence of Results section of Abstract, and in Table 5.  
Response: We have made reporting in abstract consistent as suggested.  
“In multivariable-adjusted analyses, overall improvement in knee function was rated as ‘better’ slightly more often at 2-years by patients with income in the ≤$35K compared to patients with income >$45K (p=0.06).”