Reviewer’s report

Title: Adaptation and validation of the Treatment Burden Questionnaire (TBQ) in English using an internet platform

Version: 1 Date: 25 March 2014

Reviewer: cynthia boyd

Reviewer’s report:

This is a well-written paper that is an important contribution to the literature. It is notable for its incorporation of patients' views into the revised instrument, and the meticulous attention to detail in translation and all other aspects of adaptation and validation. This study will be useful to researchers, and has many strengths. I believe that it will be very useful to the research community.

The comments below can be grouped into specificity of the terms used, adequately describing the representativeness of the population, and some details about the methods. The authors should be able to respond to all of these.

Major Compulsory Revisions:

1. The authors refer to "patients with multiple chronic conditions" in the last sentence of the abstract. It isn't clear here if the authors are trying to state that the TBQ will work in patients with one or more chronic conditions, regardless of type of condition, or if they mean patients with two or more chronic conditions (the usual definition of multiple chronic conditions). I believe the former is more accurate for this paper as the only inclusion criteria is one or more conditions, and the mean is 2.9, with a SD of 1.9 (I think the 1.9 is the SD, but it is not actually specified in the text or the table). A reader has to estimate, but it would appear that a significant number of participants only had one chronic condition. Thus, would replace all instances of "multiple chronic conditions" with "patients with one or more chronic conditions". Other places that should be changed: The first sentence of the discussion, and there may be a couple others easily found with the "find" tool in word.

2. The authors should acknowledge the 20% response rate in the limitations, compare this to other literature about response rates of patient surveys.

3. Rather than state that it "might not be" a representative sample, the authors should explicitly state that this "is not" a representative sample of the general population. It is a random sample of patientslikeme, but that is a convenience sample. This does not negate the value of this paper, but it is important to interpret the findings. The authors do a very good job of acknowledging other limitations of the respondent sample, in terms of computer use, etc., but a few questions are below.

4. Do you have data on whether patients are working, or what their educational or socioeconomic status is? It appears available, as others have compared
patientslikeme users to the general population in terms of educational status (second to last paragraph of the discussion). This should be in table 1, or acknowledged as a limitation. Conceivably, this might affect treatment burden.

5. The authors should discuss the distribution of the prevalence of chronic conditions in their study as it is different than the prevalence of chronic conditions in the general population in all of the countries.

For example, neurologic diseases are not the most prevalent chronic condition in any of these countries, suggesting that the sample is a convenience, not a representative, sample. The authors could compare the prevalence of these conditions with the same chronic conditions in nationally representative data from one or more of these countries in order to anchor the population.

6. The authors should specify how the respondents self-identify their chronic conditions. Also, did the authors group them into categories, or do the patients do this? Is osteoarthritis a rheumatologic condition in this sample? Do the patients answer specific questions like "has a doctor every told you you have hypertension?" or do they list their own conditions in free text? More details would be useful.

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

I have no competing interests.