Reviewer's report

Title: Testing a TheoRY-inspired MEssage (TRY-ME): a sub-trial within the Ontario Printed Educational Message (OPEM) trial [Registration number ISRCTN72772651]

Version: 2 Date: 15 March 2007

Reviewer: Nick Sevdalis

Reviewer's report:

Review of manuscript “Testing a TheoRY-inspired MEssage (TRY-ME): a sub-trial within the Ontario Printed Educational Message (OPEM) trial [Registration number ISRCTN72772651]” by Jill Francis et al.

The authors present a research project aiming to investigate the efficacy of educational materials in changing Ontario primary care physicians' prescribing behaviours. The key research question is to address differential efficacy of more and less theory-driven messages and to test the cognitive process that mediates change in behaviour.

The manuscript is clearly of interest to the readership of Implementation Science. It is well-written and it provides a good example of a theory-driven intervention, the outcomes of which (positive or null) can be explained via a number of measures that address the clinicians' thinking processes. Moreover, the choice of theoretical framework and measures is appropriate and well-justified.

There are, however, a few points that I would like to raise and that, in my view, would render the manuscript more easily accessible. (I have to note here that this is the very first time I've read the manuscript – although I understand it has already been revised at least once in the light of previous referees' comments.) I've summarised these points below.

Page 4, “higher order taxonomies and principles”: I cannot quite understand what is meant here – could be clearer.

Page 4: the authors describe a 2x2 factorial design, but it is not clear to me from what follows in brackets what the 2 factors are. Both factors should be given here and the 2 levels of each factor should be named separately in 2 sets of brackets.

Page 5, towards the bottom of the page: introducing the TPB here confuses things, as, in fact, the authors do not quite touch the theory until the bottom of page 7. I suggest you refer to your “theory-driven intervention” and nothing else and then introduce the TPB on p. 7.

Page 6, “taxonomic principles”: again, I’m having trouble to follow the authors here.

Page 6: give at least one reference to the Yale School’s work (e.g., Hovland’s work)

Page 7: you need to mention and give a reference to the Elaboration Likelihood Model of persuasion.

Page 7, bottom: not all IS readers will be familiar with the TPB. The graph shows the main factors of the theory, but it does not explain them further. I suggest you add a short paragraph explaining the model, which should be followed by your discussion of the TACT principles (i.e., the model, followed by how you go about operationalising it).

Page 8, “…that are uninformed by an explicit theoretical model”: this sentence directly contradicts what you’ve said on page 7 – in fact, you revisit it in the discussion (p. 14). I suggest, instead of contrasting theoretical vs a-theoretical, you position the work as more vs less theory-driven/informed approaches.

Page 8: I found the description of the 2x3 with the “inserts/outserts” rather unclear… Is there not a more straightforward way to describe the levels/materials?

Page 8, bottom + aims and objectives: are there plans to follow up the physicians over time? As the authors probably know, one of the thorniest issues in the persuasion/attitude change literature is that obtained
effects are often short-lived. Any plans to examine this should be outlined – if none, this is a limitation of the study (in my view, much more severe than the ones discussed) and it should be discussed.

Page 14, last paragraph: the theories come from social psychology, rather than from health psychology.

Page 14, last sentence of manuscript: the authors state in the aims and objectives that they are investigating the differential efficacy of the messages – here, however, they go on to make a directional prediction. Since there is no evidence reviewed and/or drawn upon in the manuscript that would suggest that the TPB-driven intervention will have a greater impact on physicians’ behaviours, I suggest the authors rephrase this last sentence as a non-directional research question (i.e., instead of a directional research hypothesis).

One last general comment: I believe the manuscript could be shortened by about 2 pages (although I’ve suggested the addition of a paragraph) – and thus rendered somewhat more succinct without loss of content. This is something that the authors may wish to consider.

**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, the manuscript does not need to be seen by a statistician.