Reviewer's report

Title: Investigating the complementary value of discrete choice experimentation for the evaluation of barriers and facilitators in implementation research: a questionnaire survey

Version: 1 Date: 12 March 2008

Reviewer: Verity Watson

Reviewer's report:

Overall, I found this paper interesting. The paper was well-written (bar a few typos) and the methods and results are clearly presented. The statistical analysis of the data is appropriate to the questions asked. The conclusions are justified from the results.

Discretionary revisions

1. Within the health care and health economic literature this method is usually referred to as discrete choice experiments (not experimentation), the authors switch between the terms


4. Methods. Clinical subject. line 12. ‘institute for health improvement has not published’

5. Methods. Sample and data collection. There is a lot of information about the methods of the pilot study, then nothing about the results. I think that the authors don’t need so much detail here.

6. Methods. Analyses. Are references 12,13,14,15, all necessary? They are essentially the same method in different applications, why not refer to one seminal paper?

7. Results. Are the response rates significantly different across the groups of respondents?

8. Results. Discrete choice experiment. Do the authors know why 18 respondents did not complete the DCE? Was this because it took too long? Could there be order effects? If the DCE was first would they have completed this and not the ‘traditional questionnaire’?

9. Results. Traditional questionnaire. In the traditional questionnaire analysis, is it possible to test for significant differences in distribution of responses across categories for each of the statements?
10. Discussion. The authors should discuss what is underpinning the DCE responses. DCEs have been used to elicit patients’ preferences for attributes of health care, and it is assumed that these attributes contribute to patients’ utility. Alternatively, the preferences of health care professionals have been elicited for characteristics of their job, and again it is assumed that these job characteristics are sources of utility. The authors’ must state a convincing argument for why the constructs and attributes are a source of utility for the health care professionals interviewed.

11. Discussion. ‘Second, we used two methods that did not measure quite the same’ this sentence does not make sense at the moment.

12. Discussion. The authors’ third point about forcing people to make choices and trade-offs is crucial and should be a stronger motivation for the whole paper. This is a huge advantage of the method over satisfaction studies. I would like the authors to be more forceful of this point. There is literature within health services and general practice research discussing this.

13. Discussion. ‘anaesthesiologists were expected to respond’ should this be ‘suboptimally’ rather than ‘suboptimal’.

**What next?**: Accept after minor essential revisions

**Level of interest**: An article whose findings are important to those with closely related research interests

**Quality of written English**: Needs some language corrections before being published

**Statistical review**: Yes, and I have assessed the statistics in my report.