Author’s response to reviews

Title: Foot Health Education for People with Rheumatoid Arthritis - the practitioner’s perspective.

Authors:

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Author’s response to reviews: see over
Dear Editorial Team,

Re: 1179912513562757 Foot Health Education for People with Rheumatoid Arthritis - the practitioner’s perspective – response to reviewer comments and revisions

On behalf of all my co-authors I would like to thank you and both reviewers for your comments and advised amendments. The manuscript has been reformatted so that it is double-line spaced, capitalisation within the title has been removed and author’s titles have been removed as requested. The numbering system within the manuscript has been altered to (i), (ii), (iii) etc. All other changes have been carried out and highlighted with ‘track changes’.[MSOffice1]

Additionally, please find below a point-by-point description of the changes made to the above manuscript in response to the reviewers’ comments. The page numbers have been altered due to re-formatting, but have been addressed in the order that they were initially presented.[MSOffice2]

Reviewer: Karen Vinall:

1. Major compulsory revision: The reference to Interpretative Phenomenological Analysis as a method for data analysis has been removed within the Methods section (pg 5). It now describes the thematic analysis and a referenced description of the stages of the thematic framework used.
2. **Major compulsory revision:** The reference to a ‘gender influence upon the patient-practitioner relationship’ within theme 5 (pg 15) in the results section has been modified to reflect the influence of *empathy* that was described between female patients and female practitioners, so that this can no longer be interpreted as a ‘gender affect’ due to lack of a male comparator.

3. **Discretionary Revision:** The final paragraphs of the discussion section (pg 23-24) now have details regarding the future intentions for research with regards the need for: involving male and female practitioners from a wider geographical location and within private practice through the development of a questionnaire survey.

Reviewer: Gordon Hendry:

**Minor revisions:**

1. **Page 6/7 data analysis:** Agreement of the thematic analysis framework was reached by individual review of the transcribed data by the co-author, compared with AG for consistency and then agreed upon.

2. **Page 8 – typo error theme 2, 1\(^{st}\) paragraph amended to “this”.

3. **Page 16 – theme 5, the verbatim transcription of ‘shuropodist’ amended to ‘chiropodist’.

4. **Page 21 – 2\(^{nd}\) paragraph, 1\(^{st}\) sentence amended so that it is clear that it was THIS study that is being referred to with regards one-to-one delivery being the most common method of delivery and thus no supportive reference is required.

5. **Page 22 – 2\(^{nd}\) paragraph:** comment added relating to the potential suppressing influence of more superior peers upon junior practitioner responses during the focus group.

6. **Page 23 – 1\(^{st}\) paragraph** – as the reference to an IPA approach within the method was removed in response to the 1\(^{st}\) reviewer comments this has not been directly addressed. However the strengths/weaknesses of the thematic analysis method used have been commented upon in comparison to the use of other qualitative approaches such as IPA.
Discretionary revisions:

1. Page 2, abstract paragraph 1. Considerable efforts have been made over the last 20 + years to optimise content and delivery (e.g., Kate Lorig’s work; Erik Taal; Alison Hammond) by focusing on what patient’s needs are, developing programmes to meet those needs and using theory and CBT approaches to maximise change and a number of systematic reviews have been published, in relation to general arthritis (OA and RA) education provision – but there has been no research about foot health needs in the context of RA and so I have amended this paragraph to reflect that.


3. Page 7, results section paragraph 1, sentence added to contextualise the newly qualified practitioners’ experience of managing patients with RA.

4. Comment relating to theme 4 – (page 13) and socioeconomic factors in relation to adherence to advice – comment added to discussion section (paragraph 3 pg 21/22) to reflect the impact that additional cost to patients of adhering to foot health advice that would result in a financial outlay for new footwear (for example) and thus may be a barrier to adherence.

5. Comment suggesting expansion of the point that there is a need for timely, individualized educational provision (page 20, paragraph 2). This is discussed further on page 21, paragraph 2 and supported by reference to the PRCA foot health standards (reference [5]) – within the context of education provision being driven by patients requesting information/advice that is relevant to them at any given point in time and their disease stage and within a one-to-one consultation.

6. Page 20 – final paragraph: agree that while health education and patient empowerment is not a new concept in undergraduate education, this paragraph refers to the perceived challenges that the more recently qualified practitioners faced when patients were ambivalent to following foot health advice. Yes HEI’s do teach undergraduates about strategies to engage with patients in a positive way but the newer qualified participants in this study did not feel equipped to cope...
effectively with a negative response to their attempts to provide patients with foot health education, they felt unable to cope with patient resistance. The point here is maybe we should focus teaching equally upon how to cope with those patients who really do not want to engage – so that newly qualified (and others) are less likely to become de-motivated in their continuing provision of patient education.

7. Page 24 – paragraph 1, additional comment added relating to the potential importance of seeking the views of other AHPs/consultants with regards the provision of foot health education.

I hope this is a detailed enough description of the changes made and explanation for those not directly addressed. If you require any additional information, I would be more than happy to provide it.

Yours sincerely,

Andrea Graham, Lecturer in Podiatry.