Author's response to reviews

Title: Case management via telephone counselling and SMS for weight maintenance in adolescent obesity: study concept of the TeAM program

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Author's response to reviews: see over
Dear Dr. Backholder, dear Carisse Reyes,

Thank you very much for having reviewed our above mentioned manuscript and for giving us again the opportunity to submit a revised version. We submit herein the revised manuscript, according to the editor’s comments and suggestions. As requested, all corrections and amendments are marked in the text. The point-to-point reply to all comments is listed below.

Please do not hesitate to contact us if you have any questions regarding this manuscript.

Sincerely,
Jana Markert
Additional Editorial Requirements:

1. The aim in the abstract and at the end of the introduction are discordant. As I see it, the aim of the manuscript is to present the design of the proposed randomized controlled trial, TeAM, and to present baseline data for the feasibility study (the feasibility study is not mentioned in the abstract aim, yet this is a major part of the manuscript). Please revise so that both the abstract and introduction align. The manuscript does not 'evaluate' the feasibility study.

   We thank the editorial office for the important note. The abstract and the introduction were changed in order to point out more clearly the aims of the manuscript (lines 29-34, page 2 and lines 94-98, page 3).

2. The recruitment and baseline description of the feasibility cohort has already been conducted. Therefore, when describing recruitment or collection of baseline data please keep to past-tense (e.g. 38 adolescents were recruited...randomisation was carried out... For data that is not yet collected please use future tense.

   The tenses were changed throughout the whole manuscript, according to the editor’s suggestion.

3. It appears that sections 2.1-2.8 mainly relate to the feasibility study. It may be clearer to include these as sub-sections under and overall section of feasibility study. This was it will be clear that study design refers to study design of feasibility study and participant eligibility refers to participant eligibility of feasibility study. Ethical approval, which relates to both the feasibility study and the envisaged RCT, could be placed at the end of the methods section.

   The section headings of the methods-section were changed into: 2. Methods, 2.1 Feasibility study, 2.2 Envisaged design and analysis of the planned efficacy study (RCT), and 2.3 Ethical approval.

4. Section 2.9 of methods - change to envisaged design and analysis of...

   Done (line 246, page 7).

5. Section 2.10 of methods - information on where the trial will be conducted has already been mentioned in section 2.1. if this section then only includes how baseline data from the feasibility study was analysed it should be included before section 2.9 (envisaged RCT).

   Information on the conduction of the trial is now summarized in 2.1.1 (lines 118-131, page 4).
6. Section 3.1 of results - there is no need to repeat n=35 for all descriptive statistics as you have already included the final n as 35 in the section above. Please revise 14 boys and 24 girls to just the 35 participants that were included in the baseline data collection.

We thank the editorial office for this valuable comment. As sociodemographic data are available of all 38 participants and only the medical assessment is lacking (see also table 2 on page 16), we would suggest to leave the 38 participants in the baseline data description. The redundant (n=35) were erased (lines 295-301, pages 8 and 9).

7. Section 3.2 of results - please refer to feasibility study not TeAM-Program Done (line 298, page 8).