Author's response to reviews

Title: Pain, Distress, and Anticipated Recovery for Older Versus Younger Emergency Department Patients after Motor Vehicle Collision

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Author's response to reviews: see over
Dr. Mangiameli,

Thank you for your interest in our paper (MS: 8986986421075291) and insightful reviewer comments. We have attached a revised manuscript and have provided responses to each reviewer comment below. We appreciate this opportunity to improve our manuscript. If you have additional questions or concerns, please do not hesitate to contact me.

Respectfully,

Timothy F. Platts-Mills, MD, MSc, on behalf of the authors
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Reviewer's report

This is a well-written, interesting paper examining ED patients seen for MVCs in terms of differences between younger and older patients. The particular focus is on pain, distress, and expected recovery time. I look forward to seeing the paper in print.

A few minor comments:

Minor essential revisions:
“Older patients who experience MVCs are more likely to live independently and have a greater risk for persistent pain and PTSD than patients who fall.” This needs a citation”

Thank you for encouraging us to review the literature on this subject. We have found references describing the problem of PTSD after falls in older adults, both among hospitalized patients and those evaluated in the ED and discharged. We have revised the discussion and add these references. The revised text now says:

“Although the problem of PTSD after MVC has not been described among older adults experiencing MVC, other injuries, such as falls, are known to cause PTSD in older adults.1,2,”

Discretionary revisions:
“Younger adults who were rear-ended had more distress, but older adults who were rear-ended had less distress.” I wonder if some of this may have to do with the consequences of a crash—in that perhaps an older adult with a rear-end crash feels less likely to be blamed for it (and perhaps have his/her license taken away). In general, some mention of the larger debates around older driver safety could be a nice addition. It could also interesting in subanalysis to see if the older adults who were driving varied in their distress or pain.

Thank you for these suggestions. We have added a section to the discussion regarding the question of driver safety among older adults. This text is below. As suggested, we also now compare pain and distress scores for drivers vs. passengers; these values have been added to Tables 4a and 4b.
“Understanding the long-term impact of MVC on older adults also has the potential to inform the ongoing debate regarding driver safety among older adults."  

1. Title Page:  
Please include a title page at the front of your manuscript file. It should contain, at minimum, the names, institutions, countries and email addresses of all authors, and the full postal address of the submitting author.  

The title page is attached in the resubmission.  

2. Requesting name of ethics committee:  
Please update your ethics statement to include the name of the ethics committee that approved your study.  

We have added a statement in the Study Design and Setting section of the methods that the UNC-Chapel Hill Institutional Review Board approved the study. Additionally we state all the enrolling sites in the same section and that their institutional review boards approved the study as well.  

3. Competing Interests:  
Please be advised that manuscripts must include a "Competing interests" section. This should be placed after the Conclusions/Abbreviations. If there are none to declare, please include the statement "The authors declare that they have no competing interests." Please consider the following questions and include an appropriate declaration of competing interests in your manuscript:  

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We have added the competing interests section and explicitly stated, “The authors declare that they have no competing interests.”
4. Authors? Contributions:
For manuscripts with more than one author, all BMC Series journals require an Authors' Contributions section to be placed after the Competing Interests section.

An 'author' is generally considered to be someone who has made substantive intellectual contributions to a published study. To qualify as an author one should 1) have made substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data; 2) have been involved in drafting the manuscript or revising it critically for important intellectual content; and 3) have given final approval of the version to be published. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. Acquisition of funding, collection of data, or general supervision of the research group, alone, does not justify authorship.

We suggest the following format (please use initials to refer to each author's contribution): AB carried out the molecular genetic studies, participated in the sequence alignment and drafted the manuscript. JY carried out the immunoassays. MT participated in the sequence alignment. ES participated in the design of the study and performed the statistical analysis. FG conceived of the study, and participated in its design and coordination and helped to draft the manuscript. All authors read and approved the final manuscript.

Contributors who do not meet the criteria for authorship should be listed in an acknowledgements section. Examples of those who might be acknowledged include a person who provided purely technical help, writing assistance, or a department chair who provided only general support.

We have added the Author Contributions section after the Competing Interests section.

5. Acknowledgement:
By way of a section ?Acknowledgements?, please acknowledge anyone who contributed towards the article by making substantial contributions to conception, design, acquisition of data, or analysis and interpretation of data, or who was involved in drafting the manuscript or revising it critically for important intellectual content, but who does not meet the criteria for authorship. Please also include the source(s) of funding for each author, and for the manuscript preparation. Authors must describe the role of the funding body, if any, in design, in the collection, analysis, and interpretation of data; in the writing of the manuscript; and in the decision to submit the manuscript for publication. Please also acknowledge anyone who contributed materials essential for the study. If a language editor has made significant revision of the manuscript, we recommend that you acknowledge the editor by name, where possible.

The role of a scientific (medical) writer must be included in the acknowledgements section, including their source(s) of funding. We suggest wording such as 'We thank Jane Doe who provided medical writing services on behalf of XYZ Pharmaceuticals Ltd.' Authors should obtain permission to acknowledge from all those mentioned in the Acknowledgements section.

We have added an Acknowledgements and Funding Section in the Title Page. We acknowledge the funding sources but do not have any further acknowledgements (e.g. there were no contributing individuals other than the authors).

6. Please remove figures from text and upload individually as figure files but leaving figure legends as text at end of manuscript after references.

The figures have been removed and uploaded individually. As per request, the figure legends have been moved to the end of the manuscript after references.
References: