Reviewer’s report

Title: Perspectives on disclosure of the dementia diagnosis among primary care physicians in Japan: A qualitatively driven mixed methods study

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Reviewer: Antonija Poplas Susic

Reviewer’s report:

It is very interesting study focused on communicating/disclosing dementia to patients and family members and describes feelings, meanings and attitudes of physicians being involved in person/community-centred care. In general, the core of the study is illuminating communication skills of physicians talking about disclosing bad news to patients which is otherwise very usual topic. Also in this manuscript it is mentioned that similar has been happening while disclose cancer to patients.

The authors state themselves that some aspects of study differ from results of other countries. The reason they consider to be important for that difference is well developed long-term care in Japan. If study compared situations and circumstances from different countries, it would be much more interesting for publishing at the international level. The study is specifically important to Japan but less to other countries.

The methodology is qualitative but you also involved qualitative tool which assessed comfort level of participants in disclosing dementia on a scale from 1 to 10.

I think that at least one limitation discussed in the article (not involving patients) is not in line with the topic of the study.

I suggest publishing article in one of domestic/regional journal which.

Additionally, there are some questions/ambiguities that need to be clarified.

Page 3, line 24,: …and reviewed for the appropriateness of the language and the substance of the inquiry for a Japanese context.

Who did revision and how?

Page 4, line 11-12: For each of the major themes, we developed additional sub-themes to finalize the coding scheme.

I am interested on sub-themes related to "disclosure" (which is a topic of this article) to be presented/gathered at one point.
The method section describes the qualitative methodology as using semi-structured interviews being conducted with 24 primary care physicians by purposeful sampling. But on page 6 (line 53), you describe a quantitative tool as »to rate their comfort level in disclosing dementia on a scale of 1 to 10«.

This part is not described in Method section. According to Results section, the Method section needs to be revised and clarified

Page 6, last line (58)

….., and then analyzed the characteristics of each group.

How these characteristics were analysed/interpreted?

Page 7, line 31, subtitle: Rural versus urban considerations

The section misses results/quotes.

Page 7, lines 33-37: Although access to additional resources differs between rural and urban physicians, the differences in attitudes of disclosing dementia seem to vary based on individual beliefs of the primary care physicians rather than their practice environment.

This statement belongs to the Discussion section not to Result section.

Page 7, line 52 until page 8, line 4:

We find that, for a number of participants, …is not necessarily the patient but collectively the patient and his/her family members… Therein lies the rationale for physicians to always include family members when disclosing dementia.

Inconsistency in the same paragraph. Needed to be clarified.

Page 7, line 58, page 8, line 3: You wrote: ….psychological stability of patients' family members as crucial factors in maintaining dementia patients' quality of life.

What do you mean with psychological stability?

Was it mentioned in results of the study?

Page 8, line 57: Limitations of this study include, first, that the study participants were all physicians.

The title ”Perspectives on disclosure of dementia diagnosis among primary care physicians in Japan: a qualitative study” is focused on physicians. The title guides the reader to be informed on physicians' views.
Why did you compose the study from physicians only if you know in advance that it is a limitation? Why do you think that following the title is a limitation?

Page 9, lines 12-17: It remains unclear if the years of clinical practice or the environment in which physicians work affect physicians' perspectives on disclosure. Future research using probability sampling could delineate associations between physician characteristics, the work environment, and physicians' attitudes and anxiety about disclosure.

Other statistical methods should be used to assess factors influencing physicians to disclose dementia.

**Are the methods appropriate and well described?**
If not, please specify what is required in your comments to the authors.

Yes

**Does the work include the necessary controls?**
If not, please specify which controls are required in your comments to the authors.

Unable to assess

**Are the conclusions drawn adequately supported by the data shown?**
If not, please explain in your comments to the authors.

No

**Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?**
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

**Quality of written English**
Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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