**Reviewer’s report**

**Title:** Barriers and facilitators to screening and treating malnutrition in older adults living in the community: A mixed-methods synthesis

**Version:** 0  **Date:** 22 Oct 2018

**Reviewer:** Heather Keller

**Reviewer's report:**

This is a much-needed review of the literature that provides a strong call for further research and practice change in primary care with respect to nutrition screening of older adults.

Abstract:

Provide a purpose statement.

Authors: thank you for identifying by initials those who did various aspects of the review. However, this was focused on a few of the several authors listed. How were other authors involved?

Introduction:

Differentiate undernutrition/malnutrition risk and undernutrition/malnutrition (see Cederholm et al., 2016). What is the prevalence of risk vs. diagnosed malnutrition?

Clarify that MUST identifies risk but does not diagnose malnutrition.

Some discussion on care pathways and if treatment is recommended after screening vs. diagnosis is warranted. One of the barriers to treatment may be resistance on the part of the older client to attend a dietitian consultation for diagnosis, as this is another office visit.

Methods: Nicely written, concise, rigorous.

Reliability testing was done both for the thematic coding and the quality rating. However, results of this reliability assessment are not presented the thematic coding. Was the quality rating for articles done by both reviewers for all articles?
Results:

Line 205 unclear why this line starts with 'not mentioned before'

Referencing of the noted barriers and intervention components from the articles is inconsistent. For example Lines 265-70 reference the citations from which this barrier was drawn. Review other sections to ensure these details are cited.

Although noted in the tables and in the methods, it is not clear if results for only the high quality articles are presented in the text.

Discussion:

Line 314: further comment is required. There are articles available on use of ONS in the community; cite these and modify the blanket statement that ONS is not effective in this setting.

Limitations:

A further limitation to consider is the search starting after 2012 when the systematic review was completed. This original systematic review had a different purpose and it is likely that barriers/facilitators to screening existed in prior articles, but were not represented in that review.

Discuss limitations of using the MMAT for quality assessment.

Conclusions:

There is a need to conduct effectiveness studies to overcome the HCP skepticism for screening. Add this point to the conclusion paragraph.

A reference to consider:


Minor edits:

Line 206, do not capitalize "One" Line 365 "First"
Line 252 provide citation for this statement

**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.

Yes

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

Yes

**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:

Acceptable

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