Author’s response to reviews

Title: Attitudes of Primary Care Physicians Toward Prescribing Buprenorphine: A Narrative Review

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Author’s response to reviews:

Dear Editors of BMC Family Practice,

Thank you very much for your constructive feedback and thoughtful comments. As requested, a clean copy with no highlighting or tracked changes has been attached. Please again refer to our “Response to Critique” document for specific, line-by-line responses to your suggestions.

We greatly appreciate your time and efforts to assist us in improving our manuscript.

Editor
Comment: Please move your declarations to the bottom of your manuscript. They should be located between your list of abbreviations and your list of references.
Response: Thank you for the direction; we have moved the Declaration to the appropriate location.

Editor
Comment: At this stage, please also upload a clean version of your manuscript, without tracked changes or highlighted text, as this may interfere with the production process.
Response: A clean version has been submitted.

Reviewer 1
Comment: Firstly, in the second paragraph of the introduction, could you delete the term ‘in particular’ - it could be interpreted that you are suggesting buprenorphine is more efficacious than methadone as first line treatment for opioid dependence, and this of course is not the case. Leaving this statement here, risks putting some readers offside from your introduction if they feel there is any ‘anti methadone treatment’ bias.
Response: Thank you for the insight; we have deleted the term “in particular” to avoid any suggestion of bias.

Reviewer 1
Comment: Secondly, in the results section, the paragraph on 'cost' is a little confusing. I would rearrange some of the ideas in this paragraph, for example by bringing the statements about cost together. I would move the statement beginning with 'for example' further down the paragraph, and remove the words 'for example' as what follows is not an example of what you have previously stated.
Response: Thank you for the constructive suggestions; we have restructured the paragraph on “cost” and attempted to clarify providers’ exact concerns about the financial impact of buprenorphine (cost to patients, vs cost to providers)

Reviewer 1
Comment: Finally, in the discussion section, I would leave out the statement 'these hesitations are eminently understandable' and leave it to the readers to decide. I would remove the term 'arduous' unless you are quoting from a study where people have described this as arduous. The sentence about the 8 hour training and urinary drug screening reads like the authors' views rather than a discussion of study respondents' views - if I am incorrect about this there should be a mention of this issue in the results section.
Response: Excellent point; we have rephrased this paragraph to simply reflect some of the potential logistical barriers which providers might face, without providing additional interpretations