Author’s response to reviews

Title: Inflammatory Bowel Disease Patient Perceptions of Diagnostic and Monitoring Tests and Procedures

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Author’s response to reviews:

Dear Dr. Sharma,

We would first like to thank you for this opportunity to submit an improved version of our paper titled "Inflammatory Bowel Disease Patient Perceptions of Diagnostic and Monitoring Tests and Procedures" (BMGE-D-18-00615) to BMC Gastroenterology.

We greatly appreciate the suggestions made by the reviewers who were very helpful with their insightful comments. We have made revisions based on their review. More specifically, please find below, for your convenience, a table addressing each reviewer’s comments.

We hope this new version will meet your expectations, but please do not hesitate to contact me should you have any questions or need any additional information.

Best regards.
Reviewer 1 - Comments

1. Given high prevalence of IBD in Canada and simple nature of study, larger sample size could have been easily achieved for larger application of study results.

Reply: Indeed, a larger sample size would be expected to further enhance the applicability of the present study, notwithstanding the associated statistical considerations that are presented in the manuscript.

As mentioned from p.6 line 22 to p.7 line 2, efforts to favor enrolment included the fact that (i) the survey was available over a 5-month period, and (ii) five periodic reminders were sent on CCC’s website, newsletters and social media. Through these approaches and measures, a response rate of 22.5% was achieved, which is within ranges that have been previously reported for similar studies.

In line with the relevance of the comment, this limitation is now mentioned on p.24 line 23: “A higher response rate would have provided a larger sample size for broader application of study results.”

2. You have not mentioned that whether all patients were enrolled from one Gastroenterology clinic or it was a multi-center study.

Reply: As the study involved a survey intended to access directly the patients through CCC (p.6 line 19 to p.7 line 3), the concept of study sites per se remains limited in the present context, although the study was “multicenter” by nature, in the sense that subjects were residents from 10 different Canadian or provinces (covering a distance of more than 5,500 km).(Table 1, p.9, line 25-46).

In order to clarify this concept, the following text has been added on p.7 line 3: “In total, 210 adult participants were reached across 10 different Canadian provinces and/or territories…”

3. You have not mentioned what tests were included in ‘General blood test’ and whether that tests were costly or not as 6 patients refused them for the fear of cost since this issue will apply more to the tests like MRI.
Reply: The web survey did not specify which tests were included in “General blood test”. It is indeed surprising to see that 6 respondents mentioned “Cost” as a reason for refusal since these tests are covered by the public health system in Canada.

In order to address this observation, the following sentences have been added on p.20 line 23:

“Six patients mentioned cost as a reason for refusal. Since these tests are mostly covered by the public health system in Canada, future studies could further explore the costs to patients for blood testing.”

4. Kindly mention the frequency of blood testing which was requested which may explain low level of comfort and compliance to blood testing.

Reply: The web survey did not contain a specific question about the frequency per se of the blood testing that was requested. However, this could indeed represent a potential explanation affecting level of comfort and compliance to having blood tests.

In order to address this point, the following sentence has been added on p.20 line 22:

“The frequency of the blood testing which was requested may explain patients’ low level of comfort and compliance.”

5. In discussion part page no 23 you have mentioned that medical imaging is least often requested and most commonly refused. However, these data do not correlate with your data in table no-2: Kindly clarify.

Reply: In order to address this important observation, the following sentence has been revised on p.23 lines 13-14, such that the text correlates with the data presented in Table 2: “Among all of the procedures presented in this study, medical imaging is the least-often requested. It is more commonly refused than colonoscopy, colon biopsy, and stool test.”

6. Limitations: Response rate low amongst all patients enrolled in CCC website.

Reply: Notwithstanding the fact that the response rate observed in the present study was within the ranges previously reported in the literature, this limitation is acknowledged and is now
mentioned on p.24 line 23, as follows: “A higher response rate would have provided a larger sample size for broader application of study results.”

Reviewer 2 - Comments

1. We suggest to quote the following articles:


Reply: As proposed, the said article is now referred to on p. 3, line 17, following the text “(…) is beneficial and for which a treatment exists (6).”


Reply: As proposed, the said article is now referred to on p. 3, line 22, following the text “(…) illness remains unmonitored (8).”

3. We suggest to quote the following articles:


Reply: As proposed, the said article is now referred to on p. 6, line 8, following the text “In a patient-centered approach, it is essential to gain a better understanding of patient perceptions of the diagnostic and monitoring tests and procedures used.”