Author’s response to reviews

Title: "Pisando Fuerte": an evidence-based falls prevention program for Hispanic/Latinos Older adults: Results of an implementation trial.

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Author’s response to reviews:

Dear Editor,

We appreciate the opportunity to revise our manuscript titled “"Pisando Fuerte": an evidence-based falls prevention program for Hispanic/Latinos Older adults: Results of an implementation trial.” In response to the reviewer and editor comments, we have prepared a point-by-point response to each comment, with any revisions described. We uploaded a “tracked version” of our manuscript, as well as the clean of the revised manuscript as the main document.

Please do not hesitate to contact us with any further questions or suggestions. We look forward to your evaluation of the revised manuscript.

Sincerely,

Maria Mora Pinzon, MD, MS
Reviewer reports:

C. W. Fan, Doctor in Medicine (Post grad) (Reviewer 1):

1. Comment There are differences between Stepping On Program and PF in use of weights for exercise. The authors have to ascertain whether if this modification change the efficacy of the programme in falls prevention.

Response: We agree with the reviewer that more information on this modification is required. A limitation of our study is that we were not able to evaluate variations in lower extremity strength and overall physical performance with the omission of weights as a required element. This study was not designed to assess efficacy in a controlled trial design. We agree that further study is needed to assess efficacy and determine if omission of weights resulted in changes in physical performance compared to the original. We have added this to the limitations of the paper.

2. Comment Regarding participant selections, there are differences between two sites, participants of one site were younger; there were more men in another; the education attainment were also different. Of note, the participants experience more fear of falling than falls; (5/24) had falls. The exercise programme may not have as much impact as those with poor lower limb strength and balance impairment.

Response: We appreciate the reviewer calling attention to the differences between sites and now note this in the discussion.

3. Comment: When the intervention call for the participants to contact outside agency such as pharmacist, eye tests, change footwear, talking to doctor, the adoption is less common. How does this compare with other Stepping On program. If this is an important component, future falls program may need to consider how to break through those barriers.

Response: We added to the discussion why we can't compare uptake of health behaviors with the original RCT, which is due to the different methodologies used in the studies. We want to point out that talking to a doctor is an element that has been emphasized for Pisando Fuerte based on the recommendations of the advisory board recommendations

4. Comment: Consider local champion to ensure adherence to programme.

Response: We agree that having a leader who is seen as a local champion is important and helps to ensure adherence to the program. We have expanded the language regarding the characteristics of the leader in the discussion.
5. **Comment:** For those with literacy difficulty, would a youtube video of the exercise be useful as a means of delivering the exercise?

**Response:** We appreciate the suggestion. We agree it could be beneficial for those that practice the exercise at home, however, at this time we have not explored that option because based on input from our stakeholders, our population has low access to cellphones, computers and internet. The current program handouts include multiple pictures and figures to facilitate exercise.

José María Blasco, Ph.D. (Reviewer 2):

1. **Comment:** It seems to me that the research aims to implement with real Spanish/Latino sample a previously validated fall prevention program (SO). However, no reference to the validation of such program was made, or at least I am not sure why of the references 7-8 was. This information and the methods of the transcultural adaptation is necessary to properly follow this work.

**Response:** Thank you Dr. Blasco for the comment, The methods used to develop Pisando Fuerte, and the results of the first pilot have not been published, but were guided by the concepts described in References current references 19-21. To clarify the work that was performed we moved the description of the first pilot to the methods section, and expanded the description of the process used to adapt the program. Old references 7-8 (now 15-16) are about Stepping On and the process used to identify its key elements and improve fidelity (English version), which has been shown in RCTs to reduce falls (RCT -> current reference 12), confirmed by the results of several implementation studies performed in the US (current references 13 and 14).

2. **Comment:** The objectives do not seem to be well defined, or do not correspond with the work shown in the paper. It would be necessary that the authors clarify the extent of objective 1, which states that "The primary objective of this paper is to describe the effects of the adaptation and modifications on the adoption and implementation of PF", but effects on what? This should be clarified.

**Response:** Thank you so much for pointing this out, we agree the objectives were not clear. We have reworded this paragraph.
3. Comment: In addition, I wonder whether the effects should be compared to matched-controls?

Response: The purpose of the study was not to establish the effectiveness of Pisando Fuerte in reducing falls, which would require matched controls (ideally a randomized controlled trial design). The main purpose of the study was to describe the implementation of the program from the perspective of the organizations and participants. We included measures of health behaviors (FaB) to assess the association between taking the workshop and changing behavior in this setting, using a pre-post design, where each participant is its own control, which is an acceptable measure for this type of trial.

4. Comment: Other example: no mention to program costs is made in the objectives, but this is developed in the methods. If the cost of the program is something somehow important that the research aims to resolve, this should be stated from the beginning.

Response: The cost of the program is part of the implementation aspects evaluated in the Re-AIM framework (Reference 10), and as such was included in Table 2, which describes the elements described in this study in the context of the RE-AIM study. We have expanded the objectives to clarify the aspects evaluated as part of the framework.

5. Comment: Regarding the methods section, this is not conventionally structured; there is lot of information but some other seems missing. I recommend to adhere to the EQUATOR network recommendations (i.e. STROBE) or similar to report this research.

Response: We have reorganized the methods section according to the recommendation. The information included in the methods section is in line with the TIDier (Template for Intervention Description and Replication) Checklist, which is the recommended guideline for this type of study that seeks to describe and advance the implementation and further dissemination of new interventions. [http://www.equator-network.org/reporting-guidelines/tidier/](http://www.equator-network.org/reporting-guidelines/tidier/)

6. Comment: Please include the study purpose in the abstract

Response: Thank you for your comment, we have modified the abstract accordingly.

7. Comment: P3, L18. This is not a contribution to literature

Response: We updated the section to better reflect the contributions of our paper.
8. Comment: P4, L16. If a pilot study was implemented to validate the transcultural adaptation of the OS program, please reference such pilot study?

Response: As described above, the results of the pilot study have not been published. We expanded the methods section to include more detail about that pilot and added a citation for unpublished work.

9. Comment: P4, L18. I do not think introduction is the place to introduce tables

Response: We restructured the methods section and the table was moved there.

10. Comment: P4, L19 to P5, L2. This information seems the research methods, and should not be placed here. Introduction only should present the background, rationale and objective(s) of the work, maybe an overview of what was done is fine, but not a detailed one, and also to state why this work is important against similar or previous literature

Response: We have modified the introduction based on your suggestions.

11. Comment: P4, L10. Reorganize the methods: Reorganize: study design, setting, participants, intervention, outcomes, data analysis…

Response: We appreciate the comment and have reorganized accordingly.