Author’s response to reviews

Title: Enhancing adherence in trials promoting change in diet and physical activity in individuals with a diagnosis of colorectal adenoma; a systematic review of behavioural intervention approaches

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Dear Editor,

Enhancing adherence in trials promoting change in diet and physical activity in individuals with a diagnosis of colorectal adenoma; a systematic review of behavioural intervention approaches

We would like to thank the Editorial Board for providing us with further feedback on our original submission (MS: 8695488851014694). The manuscript has been revised and amended in accordance with the minor changes suggested by the Editorial board. All amendments have been highlighted within the manuscript.

1) **Subheading: Outcomes of interest of this review**

We have further clarified and justified the threshold of 50% for adherence as follows- In health behaviour, it is difficult to give a precise definition or cut-off for when behaviour is deemed acceptable or not and this may vary from one context or population to another. A judgment on what such a cut-off might be was therefore required. Following much discussion and consideration, a minimum threshold of 50% was selected because this meant at least half of the sample had achieved at least half of the intervention. This was considered in light of the fact most people in the modern Western world are sedentary and do very little physical activity – so a shift in physical activity from very little to a minimum adherence of 50% of a physical activity intervention is not insignificant and even small changes in behaviour can be clinically worthwhile. [30]

The following reference has also been cited within this section and has been added to the reference list.

2) **Subheading: Methodological quality of the included trials**

To further clarify how the quality of the included trials was assessed we have amended subsection entitled ‘Methodological quality of the included trials’ as follows - A meta analysis of trial data was not possible due to the heterogeneity in trial design and outcomes reported. Data related to trial quality was therefore subject to narrative synthesis. Trial quality was assessed using the Critical Appraisal Skills Programme RCT checklist and all trials were considered to be of high quality (scores ranging from 7.5 to 9 out of 10).

We hope that the manuscript is acceptable and look forward to hearing from you in due course.

Yours sincerely

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