Author’s response to reviews

Title: Extending access to a web-based mental health intervention: who wants more, what happens to use over time, and is it helpful? Results of a concealed, randomized controlled extension study

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Editor Comments:

Your manuscript "Extending access to a web-based mental health intervention: who wants more, what happens to use over time, and is it helpful? Results of a concealed, randomized controlled extension study" (BPSY-D-18-00634R1) has been assessed by our reviewers. Based on these reports, and my own assessment as Editor, I am pleased to inform you that it is potentially
acceptable for publication in BMC Psychiatry, once you have carried out some minor revisions suggested by our reviewers.

Response: We appreciate the opportunity to make additional revisions to our paper and thank the authors and editor again for their detailed review of our work. We have provided responses to the reviewer comments below with reference to revised sections of the text.

Thanks again for the opportunity to publish our work in BMC Psychiatry.

Reviewer reports:

Saskia M Kelders (Reviewer 1): I think the authors have put together a thorough revision and response to my comments. The paper has improved substantially, also because the focus of the paper is now more on the usage and users themselves instead of on the effects of the intervention.

Response: Thanks for this comment. We thank the reviewers for their helpful feedback in revising the manuscript to its current form which we agree is much improved.

I have only one minor comment:

In the results you mention differences between interested and non-interested participants on 'baseline' scores. But which baseline is this? Baseline for the full trial, so before any use of the intervention? Or baseline of this study, so at the time they have indicated their interest in prolonged access to the intervention?

Response: Throughout this paper, baseline refers to the time when extended access was offered. We have clarified this in both the methods (page 10, line 16) and results (page 11, line 16) sections, as well as in Tables 1 and 2 in the Notes section.

Furthermore, as you have outcome measures at both initial baseline and time of re-randomization, did you check whether there was a difference in improvement on outcomes within the first 3 months? E.g. were people who experienced improvement more likely to wish to continue with the intervention? This would be very interesting to see.

Response: We did not look at the impact of individual trajectories of improvement and interest in continued access. We hypothesize that those who found it helpful continued to express interest. Another possible hypothesis is that those who improved were less likely to express interest in extended access because they no longer needed it. Aside from the finding that higher
baseline anxiety predicted extended interest, there were no significant differences between the interested and not interested groups in other baseline variables related to symptoms or quality of life. That said, the mean PHQ-9 and EQ-VAS (subjective quality of life) were more favourable in the not interested groups, suggestive of less depression and higher subjective quality of life at the time the extended access was offered. We can’t make definitive conclusions about this based on insignificant findings, but there are likely multiple trajectories of users as mentioned in the discussion with reference to literature that has looked at how users of electronic patient portals cluster across time. We have opted not to do additional exploratory analysis for this paper, but this is a topic of further investigation that we are pursuing separately.

Kristina Fuhr (Reviewer 3): Thank you for clarifying and modifying the manuscript. I believe in the current form, the manuscript can be accepted.

I only have one minor comment left.

The manuscript benefits from the re-structuring following the three distinct research questions presented on p. 6. However, I would insert them in the introduction of the study rather than in the methods section.

Response: Thanks for this suggestion. We have made this change and moved the study research questions to the introduction.