Author’s response to reviews

Title: Experiences of positive encounters with healthcare professionals among women on long-term sickness absence due to breast cancer or due to other diagnoses: A nationwide survey

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Author’s response to reviews:

Regarding manuscript PUBH-D-18-00354

Dear Editor,

We are very grateful for the possibility to submit a revised version of our manuscript “Experiences of positive encounters with healthcare professionals among women on long-term sickness absence due to breast cancer or due to other diagnoses: A nationwide survey” (PUBH-D-18-00354). We are also grateful for the useful comments from the reviewers and have handled the comments in the revised manuscript according to the suggestions by using “track change” for the manuscript.

Please find our responses to reviewer comments below, also indicating lines where information has been added, when applicable.

On behalf of all the co-authors,

Mirkka Söderman
RN, MsN, PhD student,

Comments and responses on Revision 2 version

Reviewer 2, Miyako Takahashi, M.D., Ph.D.

Reviewer comment: After all, the authors do not provide rationale to compare women with BC with those who with other illnesses not BC.

Response: The rationale for comparing experiences of women on long-term SA due to BC with those of other women on long-term SA regarding encounters with healthcare professionals was that there so far is some knowledge on experiences among women in general – however, here we wanted to investigate if these results could also be applied to women with BC. Such knowledge is needed to e.g., answer questions if the same types of interventions to promote professionals’ encounters of patients can be applied in healthcare settings for women with BC or should also other aspects be considered. To research such aspects many types of studies. of course, are needed, using different types of data and perspectives. Here, we explored this question using data from a nationwide population-based survey to half of all women being long-term sickness absent in a whole country. We have in other studies explored experiences of such encounters among women with BC, based on, e.g., focus-group interviews. However, such studies have scientific limitations since very few, and often very selected, groups of participants are included. Therefore, we also see it as a great scientific advantage that this question could be explored in a large sample as this – probably the largest such survey also internationally.

We have now in the Background section included some more text about this, (see page 2 lines 1-3) and also added a paragraph concerning this in the Discussion section (see page 12 lines 19-25).

Reviewer 4

Reviewer comment: The authors have rewritten some paragraphs and have made some points more clear. The authors have added more information about the questionnaire, which clarifies
Response: We have now in the revised manuscript, in the Discussion section (see page 9 lines 18-19 and 12 lines 19-25) added recommendation about future studies based on our results. Such studies are needed based on differences in healthcare settings, e.g. from different countries, to elucidate whether experiences from women with BC in Sweden are the same as among women in other countries. Moreover, also longitudinal, prospective studies are warranted, following women over time regarding e.g., return to work. Intervention studies in oncology healthcare settings, with programs to develop encounter competence regarding aspects of work and SA among healthcare professionals are also warranted to investigate effects of such interventions.