Reviewer’s report

Title: Why women choose compounded bioidentical hormone therapy: Lessons from a qualitative study of menopausal decision-making

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Reviewer: Christina Bryant

Reviewer’s report:

This paper addresses an important clinical issue, namely the understanding that women have regarding bioidentical hormone therapy and the reasons they choose it. Although a qualitative approach to this question is appropriate, the paper is overly long and diffuse. The data it reports were also collected 10 years ago and I am not sure how relevant those views are to the current landscape.

Abstract

The Abstract provides an accurate reflection of the manuscript's content.

Introduction

The Introduction provides an adequate overview of the key issues around the intersection between menopause and hormone use. The section on the history of HT is interesting but overly long. Some specific recommendations:

* On page 4 the paragraph beginning "This paper uses qualitative…” sounds like the conclusion to the Introduction, and as such, should I think be integrated with the final paragraph of the Introduction on page 8.

* I think that the omission of any consideration of theories of decision making about health care is a significant shortcoming and suggest that the authors make some of the material on page 5-7 more succinct and add a brief review of some of the theoretical underpinnings of health care decision making. For example, they may find it useful to refer to the article by Joseph-Williams et al. (2014).

Methods

* I note that data collection took place in 2007-2008. The authors need to justify how these data are still relevant today.
Please provide a stronger justification for the use of qualitative methods and what principles guided the selection thematic analysis. Although the term is not explicitly used, it sounds like this is the approach chosen.

Results and Discussion

The Results are very detailed, and I believe the main points could be conveyed more concisely.

On page 20, the authors refer to short-term memory loss and insomnia as "severe menopausal symptoms", but it is not clear that these are established as core menopausal symptoms. I would suggest greater caution in this regard, perhaps referring to "…symptoms, such as memory loss and insomnia, perceived by some women to be symptoms of the menopause" (or similar).

Conclusion

I would have liked the conclusion to relate the findings back to the existing literature, and other studies that have examined women's attitudes to the menopause and HT in particular (e.g., Jin et al., 2015, though there are many more). Without this, it is not clear what this study adds. In general, I applaud the focus on garnering women's views and the notion that women are seeking more person-focused treatment, but I think the authors could be more specific about how we can improve clinical processes so that women do feel they are receiving the individualised care they need.

Are the methods appropriate and well described?  
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?  
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Unable to assess

Are the conclusions drawn adequately supported by the data shown?  
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Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?  
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Not relevant to this manuscript

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