Reviewer’s report

Title: ARE ADVANCE DIRECTIVES HELPFUL FOR GOOD END OF LIFE DECISION MAKING: A CROSS SECTIONAL SURVEY OF HEALTH PROFESSIONALS

Version: 0 Date: 11 Aug 2016

Reviewer: Simon Jenkins

Reviewer’s report:

Dear authors,

This paper considers interesting and useful questions about the understanding and perception of advance directives amongst healthcare professionals (henceforth HCPs). The research on which the paper reports may add original insight into these professionals' use of and attitudes towards AD, especially in a Lithuanian context.

Nevertheless, I have some concerns about the study methodology, and some more minor concerns about the structure and presentation of the paper. These concerns lead me to suggest that the paper undergo major revision before resubmission.

* The background section is interesting and informative, and sets up the context quite neatly. However, it's not clear why the study is interested in ascertaining HCPs' ethical attitudes. Presumably you think that HCPs' ethical attitudes are relevant to generating policy on AD in Lithuania, but the background section says nothing to this effect. I think you could do a bit more work to tie the background section to the study itself.

* The methods section lacks detail, making it hard to evaluate the study itself. It would be useful to have more detail about the pilot study, which is only mentioned in passing. The Likert scale used in the study questionnaire seemed to have been asymmetrical for some questions, or at best the description of this in the paper is unclear. Details of sampling methods are really lacking - the brief sentence on sampling seems to be more like inclusion criteria rather than sampling. This section therefore requires a lot more detail so that the study could be replicated more precisely by another research team.

* The methods section also appears to cite Beauchamp and Childress's 4 principles of biomedical ethics, but doesn't mention those authors by name (and spells one of the principles wrong). It's claimed that these values are explored in the questionnaire, but they don't seem to appear. So there is a mismatch between the questionnaires shown in the appendices and what is described in the methods section.

* Another issue that I think should be addressed in the limitations section is the phrasing of the questions in the questionnaire. The questions look like they are geared towards positive answers, given how tentative they are. For example, "application of AD might be helpful...". It seems unsurprising that most respondents would respond positively to this question, as to
respond negatively, one would have to have pretty serious misgivings about AD. Given that many people were apparently unaware of ADs, it seems unlikely that they would be so unsure about them as to respond negatively. So I am a bit worried about the robustness of the questionnaire itself. This limitation should be acknowledged, and the conclusions drawn in the paper toned down to reflect these methodological issues. For example, the results section states that 'more than half the respondents in our study indicated that AD would be a solution…' (p12 line48) but the question they have been asked only stated might rather than would. This is a big difference and represents a big leap from the data to the conclusion being drawn. Another example is 'our study illustrates the global tendencies related to scientific discussions over AD' (p13 line11). This seems untrue given that the study only looked at HCPs in Lithuania. Yet another: 'the respondents' values and beliefs influenced how their attitudes were affected to their role in operationalising an advance directive' (p11 lines23-4). This influence relationship isn't supported by your results.

There is a bit of odd structuring - the results section appears to discuss results of other studies, and I think this would be better suited to the background section, and then drawn upon later as required.

The presentation of the results should be a lot clearer - currently it isn't clear what the bracketed numbers mean in the text (p8).

In some cases it is not obvious to me how the referenced texts are relevant to the claims being made. So more should be done to tie these in - examples are reference 3,

Further to this, the comprehension question (table 2 in the paper) seems quite limited, as it has only asked people to report, choosing between merely 3 answers, their level of comprehension. Given the unreliability of self-reports, and the possibility of bias resulting from the desire to be seen to appear knowledgeable, we might think that perhaps people's knowledge is even more lacking than is reported in your results. This limitation ought to be acknowledged in your paper too, perhaps with a nod towards further qualitative research that could help to gain a better understanding of their comprehension of AD - you might quiz people, or gently probe their understanding, by asking them to describe ADs and how they work. This may be a more reliable approach and deal with the self-report and bias issues above.

The results section involves some statistical analysis that I don't have the experience to evaluate. I therefore recommend statistical review.

Finally, the paper contains a few odd phrasings and one or two spelling mistakes (even in the title). It would benefit from further proofreading by a native English speaker. I think some of the ambiguities and confusions in the methods section may be resolved by tightening up the English.

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

No
Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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I recommend additional statistical review

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