Reviewer's report

Title: "Right to recommend, wrong to require". An empirical and philosophical study of the views among physicians and the general public on smoking cessation as a condition for surgery.

Version: 0 Date: 27 Jan 2017

Reviewer: Adrian Carter

Reviewer's report:

This study examines the important ethical issue of the impact of smoking on operative outcomes, and perioperative smoking cessation. Specifically, the study examines the views of clinical and general public populations on making surgery conditional on smoking cessation. While this is an important ethical topic, there are a number of concerns that I have with the paper in its current form.

My biggest concern with the paper is the incorporation of qualitative data to override or make assumptions about the quantitative data that are not justified. The main conclusion of the paper is that participants favour a "recommendation" approach. However, this is based on an interpretation of the qualitative data and its application in a quantitative fashion. Over 80% supported the statement that it is ok to make treatment "conditional" upon smoking cessation. The authors then use qualitative statements by a small minority of participants to reinterpret this data and argue that by conditional they mean "recommendation" not requirement. This goes against the meaning of the word conditional. To make this further claim about "Recommendation" would require an additional question specifically examining this in a further study. I believe that the authors are therefore making a methodological error in the quantitative application of qualitative data and making a claim that the data does not support. Similarly I believe that the claim on page 11 (and again on page 15) that participants reject the requirement strategy is simply not supported by the data. That question was never put the survey participants. Given that the authors appear to support a recommendation approach (one that I believe is ethically justifiable), are the authors making a value impregnation of factual aspects?

The other major concern for the paper is the discussion about the high rates of agreement with the claim that smoking cessation is necessary to reduce post-operative harms. The authors use much of the discussion to speculate about what they see as the unreasonably high agreement with this view. I would argue that the large agreement with the claim is the fact that this view is stated in the vignette:

"According to the surgeon, smoking infers an increased risk of difficult wound healing and infections after hip replacement surgery."
It is widely recognised that survey participants are likely to support scientific or medical claims given to them in questionnaires or vignettes. Participants tend not to want to be seen as not knowing a fact that they have been told by experts. It would have been preferable to determine what participants knew prior to exposing them with information in order to assess their knowledge. The current study demonstrates that they accept this assertion. While I do not think that this is problematic for the discussion about the ethical acceptability or support for subsequent policies to get people to stop smoking prior to surgery, I believe that it makes a lot of the discussion about the source of this view redundant.

I found the discussion to be rather long and could benefit from a clearer more succinct structure. The rationale for interviewing clinicians and the general public could be made clearer. How would the views of each population impact upon the policy debate? Presumably each would have slightly different impacts upon policies regarding preoperative smoking cessation. The paper also combines an experimental approach to the views of stakeholders with an ethical analysis. It is not clear how the authors see how the empirical data on stakeholder views influences, or not, ethical deliberations about the acceptability of proposals such as making smoking cessation a requirement for surgery. I think that these aspects of the paper are something that needs to be made more explicit in the discussion of the results.

I have some other minor concerns with the paper:

* I did not fully understand the assessment of trust in response to health information. In particular how this relates to the impact of values on judgement of facts (the section on value impregnation of factual aspects). It would have been interesting to measure the level of stigma and negative moral judgements towards smokers and correlate with attitudes towards the acceptability of conditional smoking cessation or justifications for such support.

* The discussion about paternalism and the role it plays in motivating attitudes towards requiring smoking cessation is interesting, but was under-developed: was support based on paternalistic motivations, stigmatising attitudes or a wish to punish the smoker.

* The methods could be more clearly explained. For instance it wasn't easily clear whether participants could opt for more than one reason for supporting a conditional smoking cessation. It seems odd to have asked whether people support reasons against conditional smoking cessation when they have just signalled support for such a proposal.

* The introduction is a little long and unstructured. The paper in general could be made tighter and more concise and focussed.
* It was difficult to know which groups of participants were being referred to in the results - e.g. second paragraph on page 8. Were responses between GPs and surgeons similar to justify combining?

**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?**
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I recommend additional statistical review

**Quality of written English**
Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

**Declaration of competing interests**
Please complete a declaration of competing interests, considering the following questions:

1. Have you in the past five years received reimbursements, fees, funding, or salary from an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

2. Do you hold any stocks or shares in an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

3. Do you hold or are you currently applying for any patents relating to the content of the manuscript?

4. Have you received reimbursements, fees, funding, or salary from an organization that holds or has applied for patents relating to the content of the manuscript?
5. Do you have any other financial competing interests?

6. Do you have any non-financial competing interests in relation to this paper?

If you can answer no to all of the above, write 'I declare that I have no competing interests' below. If your reply is yes to any, please give details below.

I declare that I have no competing interests

I agree to the open peer review policy of the journal. I understand that my name will be included on my report to the authors and, if the manuscript is accepted for publication, my named report including any attachments I upload will be posted on the website along with the authors' responses. I agree for my report to be made available under an Open Access Creative Commons CC-BY license (http://creativecommons.org/licenses/by/4.0/). I understand that any comments which I do not wish to be included in my named report can be included as confidential comments to the editors, which will not be published.

I agree to the open peer review policy of the journal