Author’s response to reviews

Title: Effectiveness, structure, and content of nurse counseling in gynecologic oncology: a systematic review

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Author’s response to reviews:

Reviewer #2 Comment/Question 1

Abstract: Results of the abstract showed “two” studies had a high methodological quality. This was wrong based on the text and Table 1. It should change as “three” studies. Otherwise, writing was clear and organized with meaningful background and aim.

Author Response 1

Results of the abstract was changed in “three” studies with a high methodological quality (abstract, line 40, page 2)

Reviewer #2 Comment/Question 2

Methods: The headings of methods have to revise as search and screening strategy, study selection, assessment of study quality, data extraction, and methods of synthesis.

Author Response 2

The headings of methods were revised as search and screening strategy (methods, line 96, page 5), study selection (methods, line 111, page 6), assessment of study quality (methods, line 116,
page 6), data extraction (methods, line 130, page 6), and methods of synthesis (methods, line 134, page 7).

Reviewer #2 Comment/Question 3

Results: Please change T0 as T1, T1 as T2, T2 as T3, and T4 as T5 according to the conception of Campbell & Stanley (1963) in Table 1.

Author Response 3

In Table 1 T0 was changed to T1, T1 to T2, T2 to T3, T3 to T4, and T4 to T5.

Reviewer #2 Comment/Question 4

Citations and references

1. Please delete coma after last name of the first author in the whole text and Table 1. e.g., Cook, et al. 2014

2. The manuscript has a lack of volume, issue, and “doi” in many references and has underline on website address (1, 4, 7, 9, 10, 11-14, 16-20, 22-25, 27-33, 36-38, 40-47, 49-52, 55, & 57). Please check style of references carefully again for meeting the author guideline.

Author Response 4

1. The coma after the last name of the first author was deleted in the whole text, in Table 1, and in Additional file 2.

2. The reference style has been checked carefully. Underline on website address has been removed and doi inserted in all references of “articles within a journal by doi”. No missing volume and issue could be found. According to the reference guidelines on https://bmcnurs.biomedcentral.com/submission-guidelines/preparing-your-manuscript/research-article

volume without issue must be provided for “Articles within a journal”, “Articles within a journal (no page numbers)”, “Articles within a journal supplement”. Furthermore no volume and issue must be provided for “Articles within a journal by DOI”. According to these recommendations
references have been formatted for 1, 4, 7, 9, 10, 11-14, 16-20, 22-25, 27-33, 36-38, 40-47, 49-52, 55, & 57. Hope that this is correct now!

Reviewer #3 Comment/Question 1

Abstract: in the purpose, can you add the endpoint or outcome to the nursing counseling in gynecological oncology. Such as, is the review for intervention geared to improve physical and or psychological symptoms during and after cancer treatment?

Author Response 1

The purpose of the review is to review the effectiveness of nurse counseling on any patient outcomes tested thus far in gynecologic oncology before, during, and after active treatment (such as symptoms, quality of life, patient satisfaction, healthcare utilization,...). In this regard no restrictions have been made with regard to the criteria for the selection of studies (PICO-scheme) as long as any patient outcomes have been targeted by the interventions. Endpoints concerning organizational outcomes or those concerning healthcare professionals were outside the scope of this research.

The purpose of this review (abstract, page 2, line 25-27) has been clarified in this regard.

Reviewer #3 Comment/Question 2

Main effects of nurse counseling stated under results. Please add to abstract.

Also define what is included in each of the outcome such as, symptoms are for physical only or physical and psychological symptoms of cancer treatments.

Why did the authors decide to include psychosocial functioning under quality of life? Perhaps describe in your literature review how you define quality of life, and the concepts associated with it.

Author Response 2

Main effects (only outcomes that improved) of nurse counseling are now described in the abstract (abstract, page 2, line 41-42). Due to word limitations it was not possible to list all
outcomes in detail which were sensitive to nurse counseling (e.g., sexual satisfaction, specific quality of life dimensions, specific dimensions of healthcare utilization => in total 13 outcomes). In line with the data synthesis and structure of the results section these outcomes were clustered also in the abstract under the main outcome groups “quality of life”, “symptoms”, “self-care performance”, and “healthcare utilization”. Thus effects were reported in consideration of these groups within the abstract. Details are available in the main text.

What is included in each of the outcome groups is no described in the text (results, page 8-9, line 179-196).

Quality of life measures are comprised of different quality of life dimensions, including psychosocial functioning. So the question what is subsumed under quality of life and the concepts associated with it was directed by the quality of life measures used in the included studies and not by the authors themselves. This has now been highlighted in the text (results, page 8-9, line 180-189).

Reviewer #3 Comment/Question 3
Under symptoms: when authors say interventions failed to reduce hair loss, do they mean the psychological impact of losing one’s hair or the real intent was to minimize hair loss through interventions such as cold cap, vitamins intake, and so on?

Author Response 3
Thank you very much for this comment. A remarkable failure occurred in this regard! In the original study hair loss was meant as chemotherapy-induced alopecia, respectively as the physical grade of hair loss for various body parts, including scalp, eyebrows, eyelashes, axilla, pubis, legs, and arms. The intent of the intervention was not to minimize the degree of hair loss, it was in fact, to investigate, if the intervention was able to improve body image and self-esteem in women with chemotherapy-induced alopecia. Thus, hair loss was not a target endpoint of the intervention, it was measured with body image and self-esteem as covariate!!

According to this insight, the results of the original study regarding hair loss have been interpreted correctly now by the authors and were removed throughout this paper (in the text and in all tables) – as they do not present a real outcome of the counseling intervention!

Removals have been made on results, page 10, line 211-214; discussion, page 15, line 340-341, 330; Table 1; Additional file 4; and Additional file 5
To ensure that not similar failures occurred with other outcomes described in this paper, all results have been compared again with the study reports of the original studies. No other mistakes could be found.

Reviewer #3 Comment/Question 4

On page 10, authors mention psychological symptoms. How do they differentiate this from emotional dimensions under quality of life? What do they differentiate between emotional and psychological? Same comment for social support under psychological and social under quality of life.

Author Response 4

See author response 2.

Some quality of life measures used in the included studies contain questions about the occurrence of specific physical and psychological symptoms as well as about social issues/functioning. For data synthesis it was not feasible to reconstruct which effects on symptoms and psychosocial issues were observed in these quality of life measures and to subsume them under the 'symptom' outcome group since studies did not report findings of single items (results, page 9, line 184-189).

Reviewer #3 Comment/Question 5

Line 199 page 10: authors say only study examining depression was of high quality. Do they mean that all other studies mentioned prior were of low quality? Asking because the previous sentence did not speak to the quality of the studies but rather to the lack of effect of the interventions on specific enumerated variables.

Author Response 5

The other studies were of moderate quality. This information is now provided in the text (results, page 10, line 219).