Reviewer's report

Title: Defining the content and delivery of an intervention to Change AdhereNce to treatment in BonchiEctasis (CAN-BE): a qualitative approach incorporating the Theoretical Domains Framework, behavioural change techniques and stakeholder expert panels

Version: 4 Date: 28 January 2015

Reviewer: Tanja Effing

Reviewer's report:

This interesting paper describes in a structured way a method to define what domains of the Theoretical Domains Framework (TDF) and what behavioural change techniques (BCT) should ideally be included to increase the adherence of patients with bronchiectasis.

This paper uses appropriate methodology for this kind of research and will be a useful contribution to the field, however, there are a couple of issues that need some consideration. Maybe the comment below will help to further improve this paper:

Major comments:

Whereas the authors have nicely defined what TDF domains and BCTs should be used to increase general adherence of patients, not a lot was discussed about the use of these domains and techniques in addition to different interventions (with different targets). I can for example imagine that within pulmonary rehabilitation other domains and BCTs will be used than in e.g. the optimisation of medication adherence. I think issue deserves more discussion.

Abstract:
- Background: Please give a bit more background information regarding the TDF, this term will be new for a lot of readers.
- Methods: do you mean patient’s adherence to treatment? Patient’s adherence is very general.... (Also: this is not clarified in the rest of the paper)
- Conclusion: Second sentence ‘Individually tailored...secondary care’, please rewrite and make clear that this is a finding/recommendation of this study (and not a method used).

Page 4: It might be more convincing to use some more stats in the first paragraph of the ‘Background’.

Page 4, line 86: Please justify why only the 12 domain version has been used.

Methods: could you please use the same headings (Design, Sample, Materials and procedures, and analyses) for all three ‘stages’?
Page 6, line 119: Could the choice to recruit patients at the end of a related study have influenced the outcomes and/or generisability of study outcomes of the current study (certain selection of patients, patients with specific knowledge of treatment etc)? Please discuss in ‘discussion paragraph’ regarding limitations of study.

Page 7, line 148-150: any information regarding inter-rater reliability? And what process was used to reach agreement if there was a discrepancy?

Page 11, line 260-262: After having read the text at page 7 (methods stage 2) it is not clear for me how the pre-final BCT list was defined. I thought you would have used the BCT taxonomy for this, but the text at page 11 suggest differently. Could you please clarify this more by adding some more information to the text at page 7 (instead of only referring to a method described previously)?

Page 13. I miss a discussion how the results of this study relate to the findings of other (comparable) studies in different patient populations.

Minor comments:

Page 4, line 75: A lack of psychological’ instead of ‘A lack psychological’

Page 7, line 145: Please define by whom the accuracy check was done.

Page 8, line 194: ‘sampled via email’, please give a bit more details: what is meant by this?

Page 9, line 198: Please give a bit more details regarding the two related studies (....plus two related studies concerning.....). Idem for line 201, relevant systematic review regarding......

Page 10, line 241 and further. Please make clear that these are the details of the HCPs.

Page 10, first paragraph of ‘result section’. Do you maybe have the data regarding the years of experience of the HCPs. If so, please add to this paragraph.

Page 12, line 294. I would prefer to delete ‘embarrassing’ (doesn't really add to the discussion here) and to include some references.

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.
Declaration of competing interests:

'I declare that I have no competing interests