Author’s response to reviews

Title: Why Do Patients Follow Physicians’ Advice? The Influence of Patients’ Regulatory Focus on Adherence: An Empirical Study in China

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Author’s response to reviews:

Why Do Patients Follow Physicians’ Advice? The Influence of Patients’ Regulatory Focus on Adherence: An Empirical Study in China

(Manuscript ID BHSR-D-18-00894R1)

Responses to Editor

Dear Dr. Wu,

Your manuscript “Why Do Patients Follow Physicians’ Advice? The Influence of Patients’ Regulatory Focus on Adherence: An Empirical Study in China” (BHSR-D-18-00894R1) has been assessed by our reviewers. They have raised a number of points which we believe would improve the manuscript and may allow a revised version to be published in BMC Health Services Research.

Their reports, together with any other comments, are below. Please also take a moment to check our website at https://www.editorialmanager.com/bhsrc/ for any additional comments that were saved as attachments.

Please note that as BMC Health Services Research has a policy of open peer review, you will be able to see the names of the reviewers.
If you are able to fully address these points, we would encourage you to submit a revised manuscript to BMC Health Services Research. Once you have made the necessary corrections, please submit online at: https://www.editorialmanager.com/bhsr/

If you have forgotten your password, please use the 'Send Login Details' link on the login page at https://www.editorialmanager.com/bhsr/. For security reasons, your password will be reset.

A point-by-point response letter must accompany your revised manuscript. This letter must provide a detailed response to each reviewer/editorial point raised, describing exactly what amendments have been made to the manuscript text and where these can be viewed (e.g. Methods section, line 12, page 5). Please also ensure that all changes to the manuscript are indicated in the text by highlighting or using track changes. If you disagree with any comments raised, please provide a detailed rebuttal to help explain and justify your decision.

Please also ensure that your revised manuscript conforms to the journal style, which can be found at the Submission Guidelines on the journal homepage.

A decision will be made once we have received your revised manuscript, which we expect by 19 Apr 2019.

Please note, if your manuscript is accepted you will not be able to make any changes to the authors, or order of authors, of your manuscript once the editor has accepted your manuscript for publication. If you wish to make any changes to authorship before you resubmit your revisions, please reply to this email and ask for a 'Request for change in authorship' form which should be completed by all authors (including those to be removed) and returned to this email address. Please ensure that any changes in authorship fulfil the criteria for authorship as outlined in BioMed Central's editorial policies (http://www.biomedcentral.com/about/editorialpolicies#authorship).

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By resubmitting your manuscript you confirm that all author details on the revised version are correct, that all authors have agreed to authorship and order of authorship for this manuscript and that all authors have the appropriate permissions and rights to the reported data.

Please be aware that we may investigate, or ask your institute to investigate, any unauthorised attempts to change authorship or discrepancies in authorship between the submitted and revised versions of your manuscript.

I look forward to receiving your revised manuscript and please do not hesitate to contact us if you have any questions.
Best wishes,

Maria Elisabeth Johanna Zalm, Ph.D

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Response:

Dear Editor and Reviewers,

We sincerely appreciate the opportunity you provided to revise and resubmit the manuscript. Thank you so much for your valuable advice. After reading and discussing your comments and suggestions, we carefully revised our manuscript. A lot of new details and contents are supplemented in the revised manuscript. Please see the following point by point responses.

In order to show the changes more clearly and make the revised manuscript easy and friendly to read, we upload a version that highlights changes as a supplementary file.

Thank you so much again!

Technical Comments:

Editor Comments:

In addition to the reviewer’s comments below, please address the following concerns:

1. Abstract:

Your abstract should clearly summarise the main results of your study. Following the previous comments of reviewer 2, you have removed the H1, H2 etc references to your hypotheses, and replaced it with “We found that five hypotheses were supported while one was not supported.” However, it is still not clear what this means for those who have not yet read the paper. Your current abstract consists of 195 words, whereas we allow up to 350 words for the abstract. Instead of stating that some hypotheses were supported and others were not, please briefly summarise your main results instead, so that it is clear for the reader what they can expect from the paper.

Response 1:
Based on your comment, we clarified the results instead of discussing whether hypotheses were supported or not in the Abstract section.

To specify, “In terms of control variables, age had a positive effect on conservative treatments related health information seeking behavior, and patients with different resident status held different attitudes towards seeking conservative treatments related health information. However, education level did not have any effect on variables of the research model. Results of hypotheses testing corroborate that promotion focus had a positive impact on patient’s behavior of seeking emerging treatments related health information; prevention focus had a positive impact on the patient’s behavior of seeking conservative treatments related health information; conservative treatments related health information seeking behavior had a positive impact on patient adherence. In addition, media campaigns had a positive impact on the relationship between promotion focus and emerging treatments related health information seeking behavior, and website reputation had a positive impact on the relationship between prevention focus and conservative treatments related health information seeking behavior.”

For details, please kindly refer to Page 2, line 28 – Page 3, line 1.

2. Ethics approval and consent to participate
– In this section, please include a case reference number for your ethics approval.
– In this section, please include further information regarding consent to participate. You currently have included the following statement in procedure: “A statement at the front page of the questionnaire clarified the protection of participants’ privacy, and participants’ informed consent was secured.” In the ethics approval and consent to participate section, please clarify whether this consent was obtained in written or verbal form. If consent was only obtained in verbal form, please clarify the reason why.

Response 2:

Thank you for your comment. We added the case reference number and further information about informed consent in to the Ethics approval and consent to participate section.

To specify, “Ethics approval (case reference number: BJ201704007) was obtained from the Ethics Committee of School of Economics and Management, Beijing Jiaotong University in China in which the study was undertaken. The informed consent was obtained in written form.”

For details, please kindly refer to Page 18, line 5– line 12.
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Responses to Reviewer 3

STATISTICAL REVIEWER ASSESSMENT:

Is the study design appropriate for the research question (considering whether the analyzed population accurately reflects the design and whether you see any problems with control/comparison groups, e.g., likely confounders)?

Yes - overall design, population, and control groups are appropriate

Are methodologies adequate and well implemented (considering whether assumptions are addressed and whether analyses are robust)?

Yes - methodologies are adequate and well implemented, assumptions are addressed, analysis is robust

Are the analyses adequately communicated (considering whether reporting details are adequate and whether figures and tables are well labeled and described)?

No - there are minor issues

Does the interpretation accurately reflect the analyses without overstatement (considering whether limitations/bias are acknowledged and whether accurate descriptors, e.g., ‘significant’, are used?)
Yes - interpretation accurately reflects analyses, limitations/bias are acknowledged, accurate descriptors are used

Could an appropriately REVISED version of this work represent a statistically sound contribution?

Probably - with minor revisions

STATISTICAL REVIEWER COMMENTS:

This is a much improved version of the paper. However, there are still a few areas that require attention.

REQUESTED REVISIONS:

1. Page 3, line 6 implies that family relationships affect diagnosis or treatment. They may affect compliance with treatment or acceptance of the diagnosis, but they do not affect diagnosis or treatment.

Response 1:

We really appreciate your nice guidance! To avoid ambiguity, we deleted the discussion about family relationships. For details, please kindly refer to Page 3, line 33.

2. The pleasure principle was not “overthrown” by regulator focus theory. It was “replaced” by this and many other theories.

Response 2:

Thank you! Based on your guidance, we used “replaced” to replace “overthrown”. For details, please kindly refer to Page 4, line 34.

3. Page 10, line 13: this should be “<0.05,” not “0.000 < 0.05”

Response 3:
Thanks for your insightful comment! We really apologize that it is a fault, and modified it as “p < 0.001”. For details, please kindly refer to Page 10, line 48.

4. In Table 3, delete the lines with chi-squared, df, and probability level; keep the others.

Response 4:
Great thanks! We deleted the lines with chi-squared, df, and probability level and kept the others. For details, please kindly refer to Page 11, line 24 - line 31.

5. There is much in the data analysis section that really belongs in the Results section (e.g., alphas, correlations among measures, etc.).

Response 5:
Based on your comments, we moved the Data analysis section to the Results section. For details, please kindly refer to Page 10, line 27 - Page 12, line 18.

6. This may be difficult to fit on the page, but Figure 2 should have the actual path coefficients in order for the reader to see the results.

Response 6:
Thank you for your comment! We added information into Figure 2 and deleted Figure 3 to avoid information redundancy. For details, please kindly refer to Figure 2.

7. Wording difficulties:
Page 4, line 38 -- confidence of patients “with” or “in” their physicians, not “on” their physicians.
Page 4, line 45 -- add ‘because they “are dissatisfied or discontented” with their physicians’
Page 4, line 49 -- must add ‘object “to their patients seeking other information” because ...’
Page 10, line 35 -- confirmatory factor analysis, not confirmative factor analysis

Response 7:
We really appreciate your nice guidance! Based on your guidance, we improved these mistakes. For details, please kindly refer to Page 5, line 6, line 13, line 17, and Page 11, line 10.